Belief Formation Through Family Storytelling: Implications for Family Therapy

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BRIGHAM YOUNG UNIVERSITY

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of a thesis submitted by

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ABSTRACT

BELIEF TRANSMISSION THROUGH FAMILY STORYTELLING;
IMPLICATIONS FOR FAMILY THERAPY

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The purpose of this study was to phenomenologically explore and describe the influence family storytelling has on the formation and transference of beliefs. This study was a case study of one family who was identified as engaging in family storytelling. The participants were selected based on their participation in a 2004 pilot study, “A Phenomenological Examination of Family Recreational Storytelling.” The results of the 2004 pilot study were analyzed for belief-centered themes. It was upon those themes that questions for this study were based. For this study it was hypothesized that: 1) storytelling strengthens family bonds and connections; 2) storytelling facilitates the creation of individual and familial beliefs; 3) these beliefs either facilitate or constrain the functioning capability of the family and its individual members; and 4) as this phenomenon is more fully understood, powerful interventions can be utilized by therapists and implemented in the field of marriage and family therapy.
For the current study, it was concluded that family storytelling influences beliefs, which in turn affects individual action. Additionally, an individual’s overall perspective on life is capable of being shaped by the tone and nature of the stories that children are told by their parents. Finally, this study provided insight into how clinicians can coach families to implement storytelling as a therapeutic intervention. Information regarding how parents used stories and the characteristics of the story, storyteller, and setting was outlined. How children used storytelling to form and establish beliefs was explored.
DEDICATION

To Families everywhere, tell stories please.
ACKNOWLEDGEMENTS

I would like to acknowledge my former professors, Ramon Zabriskie, Patti Freeman, and Terry Olson. They worked hard to teach me well. And as long as I am acknowledging great teachers, thanks, Mr. Halloran and Mrs. Gulazian. You both are two of the most fabulous human beings I have ever encountered. Hal, you were just being you and it shaped and influenced me for good forever. I love every memory I have of you, and I love the way knowing you has shaped my thinking. Thanks, Bev, any other high school teacher would have kicked me out of class. Instead you sent me to Washington, D.C., and became a lifelong friend, how cool are you?

I am grateful for the learning opportunities I have had in my current program, and for the time and effort my committee members, Robert Stahmann and James Harper, have given to me so willingly whenever I needed their help. I am especially glad to have had the opportunity to work with Dr. Wendy L. Watson, before the addition of a new surname led her down a different life path. Her optimism and outlook have made this experience more joyful. I appreciate all she has done to help get me to this point.

Most importantly, thank you, Joseph, you have been absolutely wonderful. You have helped me every time I asked, often sacrificing yourself and your own needs. Time and time again you have shown me how dedicated you are to being my best friend, and how seriously you take the admonition to “help your wives be all they can be” given by Gordon B. Hinckley. I want to give you back what you have given me, and I look forward to doing so over the next few eternities.

Thank you, Isaac. You made it infinitely harder and I loved every minute of it. Motherhood is nutty like that.
I like what I have done, it is a nice tangible accomplishment, but, what each of these people have done for me …

I respect,

I admire

I seek to pay forward.
Belief Transmission through Family Storytelling; Implications for Family Therapy

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Chapter 1
INTRODUCTION

Storytelling is an historical leisure pastime that may be “one of the most powerful techniques that mankind has ever devised for molding human behavior” (Gardner, 1993, p. 246). Through storytelling, the psychological suffering of people who experience physical tragedy may be lessened (Bauby, 1997; Mattingly & Lawler, 2000). Storytelling is thought to facilitate learning (Gray, 1997; Scoresby, 1997; Vitz, 1990), and stories are believed to transmit wisdom, instruction, and inspiration across time (Cheyney, 1990; Roberts & Holmes, 1999). Traditional stories provide people with a feeling of connection and purpose, as well as provide templates for problem solving (Gersie, 1997; Hermans, 1992; Sluzki, 1992). In oral storytelling, the relationship between the storyteller and the listener is a crucial part of storytelling that facilitates change (Gersie & King, 1990). Indeed, Wright, Watson, & Bell (1996) state that stories have the power to affect beliefs, which in turn influence behavior (Ajzen & Fishbein, 1980). Storytelling is a family recreational activity (Gagalis-Hoffman, 2004) and, as such, has the potential to promote family bonding, teach values, instruct, and fortify families (Fulford, 1998; Holman & Epperson, 1989; Stone, 1988). It has been inferred that when these vital functions are not
performed within the family, therapeutic intervention often becomes necessary (Androutsopoulou, 2001; Gersie, 1997).

Storytelling is used in therapeutic settings to facilitate psychological healing and is described as imitating conversation in a relationship based in trust (Becvar & Becvar, 1993). It has been suggested that in narrative therapy, as in traditional storytelling, the relationship between storyteller and listener is intimate and inspires trust (Gersie & King, 1990). Trust in therapeutic relationships is crucial to facilitating changes in beliefs and behavior (Becvar & Becvar, 1993), while it has been found that changing beliefs will often change behavior (Wright et al., 1996). The relationship in narrative therapy between the client and the therapist echoes the relationship developed by traditional storytellers with their listeners, as well as the relationship parents cultivate with their children (Landreth, 1991; Marion, 1999; Scoresby, 1998). Given the similarity of these relationships, it follows that family storytelling may potentially be a powerful therapeutic intervention.

Although the benefits of storytelling have been examined in a variety of settings, the way that beliefs are formed through family storytelling has not yet been explored. Knowing as we do that beliefs have the power to facilitate or constrain, either limiting or increasing “options for solutions” (Wright et al., 1996, p.5), and that stories provide a template for problem solving thereby increasing options for solutions (Seligman, 1996; Stone, 1988; Yolen, 2000; Warner, 2000; Vitz, 1990), the field of marriage and family therapy may benefit from inquiry into how constraining and facilitating beliefs are created in the family context. Therefore, the purpose of this study is to investigate the way family storytelling may establish individual and familial beliefs.
Purpose

The purpose of this study was to phenomenologically explore and describe the influence family storytelling has on the formation and transference of beliefs.

It was hypothesized that: 1) storytelling strengthens family bonds and connections; 2) storytelling facilitates the creation of individual and familial beliefs; and 3) these beliefs either facilitate or constrain the functioning capability of the family and its individual members.

Delimitations

This study was delimited to the following:

1. One family selected from participants in the 2004 pilot study (6 pairs of parents and their adult children, twelve total participants, all over the age of 18). This family consisted of six adult children and two parents.

2. Families in which recreational storytelling was determined to exist. The existence of recreational storytelling was determined during an initial interview.

3. The use of tape recording and transcribing devices.

4. Time and duration of the study.

Limitations

This study was limited by the following:

1. The sample was homogeneous: all were white, middle class members of the LDS faith.
2. The sample was selected based upon the existence of storytelling as a recreational family activity and upon the richness of descriptive narrative provided in pilot study interviews.

3. The interpretation and analysis of qualitative data was bound by the breadth of empathic understanding, theoretical awareness, and interpretive skills of the researcher.

4. Subjects who participated in this study were volunteers. The method of this type of sampling may introduce a content skewed by the limited breadth of the sample.

5. Data collected were expressions of the subject’s perception and interpretation of events as well as the accuracy of their memories.

*Assumptions*

The assumptions of this study were as follows:

1. The setting for the interview encouraged the sharing of all pertinent information.

2. The participants responded to the researcher’s questions accurately and as requested.

3. Participants understood and did not misinterpret the researcher’s questions.

*Definition of Terms*

*Beliefs.* The lens through which individuals view the world. Beliefs influence human behavior and are “the blueprints from which we construct our lives and intermingle them with the lives of others” (Wright et al., 1996, p.19); beliefs are “the ‘truth’ of a subjective reality which influences biopsychosocialspiritual structure and functioning” (p.41).
Constraining beliefs. Beliefs which “perpetuate problems and restrict options for alternative solutions to problems” (Wright et al., 1996, p.5).

Family. Any group of two or more people that consider themselves to be family: parents, children, siblings, foster parents, grandparents, aunts, uncles, cousins, friends, and any others who consider themselves family (Bowen & McKechnie, 2002).

Facilitating beliefs. Beliefs which “increase options for solutions to problems” (Wright et al., 1996).

Family Recreational Storytelling. Storytelling families engage in during leisure time as an independent activity (Gagalis-Hoffman, 2004).

Intergenerational stories. Stories that are passed down from one generation to the next (Stone, 1988).

Narrative therapy. The field of therapeutic practice which focuses on assisting the client to form a self-narrative and/or uses stories to facilitate psychological or emotional healing (Parry & Doan, 1994; Payne, 2000).

Stories. Primarily narratives with definite beginnings, middles, and ends, but not limited to this format (Gersie & King, 1990).

Traditional stories. Stories which are part of a family or cultural heritage and describe historical and/or fictitious events.

Voice. Refers to an individual’s ability to vocalize his or her own thoughts, feelings, and emotions, usually in a self-narrative (Androutsopoulou, 2001).
Chapter 2
REVIEW OF LITERATURE

Beliefs and the influence of story

Personal beliefs have the power to affect and determine individual action (Ajzen & Fishbein, 1980), while the formation of personal belief is directly influenced by the stories people tell themselves and others (Seligman, 1990). It is important therefore to examine the role of story in the formation of values and beliefs.

Beliefs have the power to hold individuals hostage; they also have the power to set individuals free (Watson, 2001). Watson further states that behavior is affected when a person’s core belief is discovered and specific actions are taken to invite change (Watson, 2001; Wright et al., 1996). Wright et al. (1996) states that stories and beliefs are “intricately intertwined” and that medical “clinicians [who] challenge constraining beliefs … may influence the illness experience” (p.22). Wright et al. also states that “how families adapt, manage and cope … arises from their beliefs about [what] is confronting them” (p.23). Transferring this to a family or mental health setting, it follows that clinicians have the ability to affect how families react to a crisis by helping them to craft beliefs that foster actions of healthy adaptation, coping, and management of the crisis.
Understanding how beliefs are changed is relevant to the field of marriage and family therapy, since research and anecdotal evidence links individual beliefs with action (Ajzen & Fishbein, 1980; Seligman, 1998; Stone, 1988). Additionally, stories are anecdotally acknowledged to be influential in formulating and often changing beliefs (Stone, 1988; Warner, 2000). It therefore follows that further investigation may solidify the power storytelling has to influence behavior through the formation and influence of beliefs.

In addition to practitioners using stories as belief changing tools, family storytelling affects family and individual beliefs through the transference of stories that culture and maintain a family’s values and identity. Stories influence family members’ beliefs about who they are in the world and what role they play in society and in life (Stone, 1988). These beliefs have been shown to affect career and marital choices, as well as predetermine actions and reaction to life events (Gagalis-Hoffman, 2004; Seligman, 1996; Stone, 1988). Stories have the power to cultivate the human mind, to make others stop and think, evaluate situations and internal motives, (Coles, 1989; Warner, 2000) all necessary components for changing beliefs (Watson, 2001). Stories have the power to literally change the lens through which the listener views the world (Coles, 1989; Wright et al., 1996). First the historical function of stories in society and the family will be examined, and then the way stories have been used in the medical and mental health fields to promote healing will be explored.

Value and Function of Traditional Stories

Persistent patterns of storytelling, nurtured and kept alive within a society or within a family, have the ability to connect the feelings and thoughts of individuals
through generations (Fulford, 1998; Stone, 1988). In cultures with oral traditions, such as Native American and Polynesian Islanders, storytellers and the stories they tell mold the lives of the children in their society by transmitting cultural rules and values (Cheyney, 1990). The level of rapport between the storyteller and listener facilitates the experience (Gersie & King, 1990). When listening to traditional stories, Pueblo children are transfixed and listen raptly (Cheyney, 1990), indicating a level of attentiveness for young children unique to the storytelling situation (Brand & Donato, 2001).

Indeed, anthropologists have long recognized the value of stories, not only as part of the folklore of the cultures they study, but also as a vehicle for meaningful research (Rey-Heningson, 2002). Anthropologists have recognized the healing power of narrative (Sam, 2003) as well as the importance of collecting folktales as a means of more fully understanding a culture’s beliefs and values (Aziz & Aziz, 2001). Anthropologists have recognized the important role “tale bearers” play in societies (Gwyndaff, 2000) and have sought to understand the way folktales are told in order to better understand the ways they influence society and culture (Marander-Eklund, 2002). Indeed, the many functions of storytelling in the form of folklore have been long recognized in the field of anthropology.

Two of those recognized functions of storytelling, instruction and inspiration (Lanon, 2001; Sugiyama, 2001), stand out consistently across culture and throughout time (Gersie & King, 1990; Levitt, Korman, & Angus, 2000). Instruction through storytelling provides knowledge, while inspiration provides the motivation for listeners to make personal ideological and behavioral changes (Gersie, 1997). It follows that learning about the past through stories may have the power to guide actions and decisions in the
present and future (Fulford, 1998). Through instruction and inspiration, individuals may change their perspectives and their way of interacting with the world as a direct result of listening to a story (Gersie, 1997). In the right context, changes in perspective can positively affect both physical and psychological well-being (Seligman, 1992).
When medical practitioners listen to the stories of people with illness or pain, they are often better able to understand and empathize with their patients and clients (Coles, 1989; Mattingly & Lawler, 2000). “Listening to and documenting illness stories provide a powerful validation of an important human experience” (Wright et al., 1996, p. 64). In their qualitative study, Mattingly and Lawler (2000) reported that giving medical professionals more information by allowing patients to tell personal stories led to improved outcomes for patients (e.g., faster recovery times, less pain, and more adequate treatment). In his book, *The Call of Stories*, Coles (1989) related anecdotal evidence gathered during his teaching at Harvard medical school that suggests the use of doctor stories in literature improves the quality of doctor-patient relationships and results in improved patient care. These are examples of stories positively impacting the healing process of patients through an interaction between stories and the perception and behavior of others.

Stories may also have a healing effect on the teller, especially when healing is defined, in part, by a recovery of self. By telling their own story, individuals with serious illness or disability, who have been robbed of their sense of self, may be better able to recover their identity (Bauby, 1997). This in turn is thought to positively affect the psychological and possibly physical well-being of such individuals (Etchison & Kliest, 2000; Parry & Doan, 1994).

It may not be necessary, however, to have a life changing physical injury in order for storytelling to positively affect psychological well-being. Indeed, many individuals lose their sense of self because of psychological injury resulting from neglectful or
abusive relationships (Gersie, 1997; Luskin, 2002; Minuchin & Fishman, 1981). These types of psychological injuries are often addressed in the field of narrative therapy, which employs storytelling in ways that have been found to produce positive effects on psychological well-being (Androutsopoulou, 2001).

Therapy and Storytelling

People who seek therapy usually see themselves with limited options and powerless to affect their current problems (Minuchin & Fishman, 1981). Their personal stories are confined by such a mindset (Becvar & Becvar, 1993). As a result they are often unable to see themselves in charge of their own destiny and powerful enough to discover and engage in alternative solutions (Seligman, 1992). Androutsopoulou (2001) said that a life is an individual attempt to create meaning and establish one’s own place in the world. Seeing one’s self as an actor with power and autonomy, yet responsibly interconnected to other human beings, creates the context for an individual’s personal life story (Becvar & Becvar, 1993). The premise of narrative therapy is to help individuals become authors of their own stories and create good options for interacting in the world (Androutsopoulou, 2001; Hunt & Sampson, 1988).

Therapists subscribing to differing schools of thought, including narrative, strategic, and solution focused therapy, all successfully use storytelling to help individuals gain insight into their problems (Gersie, 1997). Each employs techniques that lead to re-authoring of personal narrative (Androutsopoulou, 2001). By using narratives, stories, and metaphors, a therapist can lead or guide a person to make necessary changes in their story by telling new stories that offer alternative problem solving blueprints. In narrative therapy, the therapist works with the individual to create a positive way of
viewing and narrating their life. This process is often a catalyst for resolution of the problems that caused the individual to seek therapy (Dwivedi, 1997; Gersie, 1997; Parry & Doan, 1994).

People’s lives and relationships are shaped by the stories they develop to give meaning to experiences. Many circumstances under which individuals will feel a loss of voice can be influenced by family situations (Gersie, 1997; Parry & Doan, 1994; Roberts & Holmes, 1999; Seligman, 1992). For example, Androutsopoulou (2001) recounts how a young woman came to her for help. After their first few meetings, Androutsopoulou realized that the woman had no voice of her own. When asked what she wanted to do, the woman would reply “My mother says…” or “My father thinks…” Androutsopoulou worked with the young woman by encouraging her to make up fictional stories about herself where the main authorial (decision making) voice was her own. Once the woman was comfortable with her own voice in a fictional setting, Androutsopoulou coached the young woman to apply her authorial voice to real life decisions by having the woman write stories about her current life and future goals. The result of this narrative treatment is that this young woman was able to clearly describe her desires and ambitions. It appears that storytelling catalyzes healing in therapeutic situations. Given the benefits seen in this therapeutic setting, it follows that family recreational storytelling may have therapeutic benefits for families who engage in storytelling.

*Storytelling Changes Beliefs*

Becvar and Becvar (1993) acknowledge that narrative therapy resembles conversation. Androutsopoulou (2001) suggests that for narrative therapy to be successful, a “basic level of trust must be developed” (p. 82). The elements of good
storytelling and narrative therapy are the basic components and skills necessary to form and maintain a good marital, filial, or platonic relationship (Becvar & Becvar, 1993; Richardson, Fowers, & Guignon, 1999; Scoresby, 1998). Narrative therapists engage in conversations with their clients and work to build a relationship based on trust, commitment, and listening (Becvar & Becvar, 1993; Etchison & Kliest, 2000). The nature of the therapeutic relationship as outlined here mirrors the type of relationship parents are recommended to build with their children (Landreth, 1991; Marion, 1999; Scoresby, 1998).

Mattingly and Lawler (2000) discovered that storytelling helps to mitigate belief in personal helplessness experienced in situations where there are power differentials, as has often been found to be the case in family situations (Whitchurch & Constantine, 1993). Seligman (1992) claims that believing in personal helplessness can negatively affect an individual’s physical and emotional well-being across their lifetime. Becvar and Becvar (1993) point towards the importance of family members seeing themselves as powerful, important, and influential in order for the family unit to function well. Just as modern day “self-help” authors use stories to promote their points and theories through the telling of stories in ways that invite reflection, challenge constraining beliefs, and invite facilitating beliefs into personal narrative (Arbinger, 2000; Covey, 1989; Luskin, 2002; Wright et al., 1996; Zander & Zander, 2000), so do storytellers in the family have the power to tell stories in ways that allow their listener to learn, grow, heal, and create problem solving blueprints (Hill, 1997; Seligman, 1992; Yolen, 2000).

Sluzki (1992) asserts that the stories families tell about problems in and of themselves contain both the problem and the solution. Sluzki advocates transforming the
family’s beliefs about the problem by helping the family to see alternative meaningful interpretations of their situation. He also claims that it is this altered perception of meaning that will lessen or even eliminate the effects of the perceived problem itself. As the family’s attitude (Seligman, 1992) and lack of perceived alternate possibilities for their story (Doan & Parry, 1994; Seligman, 1992) may be the cause of the problem in the first place, storytelling provides a medium through which the family can be invited to change its perceptions (Gardner, 1993). Telling family history stories may provide family members alternate views around which to shape attitudes and bind families together (Stone, 1988). Family history stories as well as personal stories shared within the family can provide listeners with blueprints for problem solving (Stone, 1988; Vitz, 1990; Yolen, 2000).

It has been suggested that every person needs to find and express their own story in order for each person’s life to qualify as their own differentiated existence (Androutsopoulou, 2001; Gersie & King, 1990). We first learn how to engage in this process within our individual family systems (Landreth, 1991; Seligman, 1992; Stone, 1988). Telling a story enables each of us to know ourselves as someone who has a voice that is worth listening to, someone who can be heard and understood; without a story of one’s own, one does not have a life of one’s own (Gersie & King, 1990). Dysfunction in families can lead to individual dysfunction and is often caused by a loss of voice (Androutsopoulou, 2001). Androutsopoulou reports that through the development of personal narrative, individuals are able to become more decisive and empowered.

Seligman (2002) asserts that in a society that is rapidly becoming more and more depressed and seeking out therapy, there is a need to have more people in our lives who
are competent in listening and relationship oriented skills. Storytelling has been observed to teach these skills (Scoresby, 1998). Human beings also need to tell and listen to stories in a system that is committed to the well-being of each individual member (Becvar & Becvar, 1993; Minuchin & Fishman, 1981; Parry & Doan, 1994; Simkinson, 1997; Yolen, 2000). Since most people enter the world within the confines of a specific family system, the use of storytelling in ways that promote the building of trust, strengthening of relationships, and personal empowerment through narration would appear to be beneficial to the individual as well as the family itself.

Families, and the ways they create their collective and individual narratives, are uniquely powerful in shaping the development of their individual members (Doherty, 1997; Orthner & Mancini, 1991; Scoresby, 1998; Shaw & Dawson, 2001; Stone, 1988). These findings combined with evidence of the health benefits of personal narrative (Mattingly & Lawler, 2000; Seligman, 1992; Wright et al., 1996), the psychological benefits of narrative therapy (Andtroutspoulou, 2001; Parry & Doan, 1994), and the potential for storytelling to positively impact families as a whole, make it evident that the phenomenon of family recreational storytelling is one worthy of investigation.

Beliefs and Family Recreational Storytelling

In a pilot study (Gagalis-Hoffman, 2004) several benefits to family recreational storytelling were identified. This study involved participants over the age of 18: 6 pairs of parents and their adult children and one 3-generation interview for a total of 15 participants. The initial findings of this pilot study indicated that children and parents in families with a culture of family storytelling equate story times with “comfort,” “security,” and “family bonding.” Parents reported using stories as tools, either to “calm
the chaos,” to teach, or to give a new perspective. Parents reported telling made-up stories and true personal stories. Interestingly, the parents were not aware of the impact the stories were having on their children. Most did not feel that their children remembered or learned anything from storytelling. However, the adult children reported that their parents’ stories impacted them greatly. Said one daughter, “Hearing those stories helped me understand what my [parents] felt was important, and that made it important to me.” This same daughter reported that “in church they always told us to be honest, but when I was little I didn’t know what honesty was … until my dad told the story about the little boy and the pockets. I heard that story and wanted to be [honest] like the little boy.” In each of these instances we see examples of how parental storytelling influences and effects individual beliefs.

Overall, in the 2004 study storytelling appeared to affect individual beliefs, as well as form a shared family belief framework. As young children, participants reported having their beliefs shaped by made-up stories because they brought complicated concepts down to a child’s level. As they grew older, participants reported wanting to hear true life stories from their parents, because it helped them to “feel like their parents understood them,” that they [the parents] had “been in similar situations, and knew what they were talking about.” Indeed, stories seemed to follow a lifespan model, with made-up stories affecting the beliefs of young children, personal stories affecting and influencing the beliefs of teenagers, and family history stories impacting beliefs systems in young adults. Once participants became parents, they began using stories. However, their purpose in using stories was to capture their children’s attention at times when things were getting out of control; it appeared that purposeful storytelling to intentionally
influence beliefs did not begin until participants became grandparents and had less day-to-day child rearing pressure.

Findings indicated that beliefs are formed and directly influenced by storytelling and that the activity of storytelling was itself a powerful process. Indeed, after the interviews were completed and the study concluded, participants would call the primary investigator to add information to their interview and to report that the process of being interviewed impacted their belief system. It appeared that storytelling follows a circular model, storytelling affects beliefs, beliefs affect storytelling. The more the storytelling occurs, the more beliefs are affected, and the more beliefs are affected, the more storytelling is influenced.

It is known that storytelling is a powerful tool in family therapy (Minuchin & Fishman, 1981). If family recreational storytelling functions in families as a kind of self administered family therapy, then the investigation of family storytelling may provide therapists with a tool that not only helps promote beliefs that facilitate healing, but that also allows constraining beliefs to be challenged and changed.
Chapter 3

METHODS

Research Design

A qualitative research design was used to explore in depth how storytelling within a family affects beliefs and influences behavior. One family was identified for participation in this study by analyzing the interviews from the father and oldest son who participated in the 2004 pilot study. Although three families who participated in the pilot study were identified as meeting the criteria for participation in this study, only one family was available for interviews. The family chosen was able to provide rich descriptive data, and members were available to participate in interviews.

Study Participants

The participants for this study were selected from the pool of 2004 pilot study participants based upon 1) ability of participant to provide a rich, thick, descriptive narrative (Kvale, 1996); 2) ability of the participant to provide answers consistent with interview questions; and 3) ability and willingness to participate in this study. Originally the researcher had intended to interview two or more families with a parent and adult child pair; however, only one pair of participants who met the criteria was available. As a result, this qualitative study became a case study with a family of eight. All participants in this study were members of the same family. Two members of the family, the father and eldest son had participated in the pilot study. For the current study, additional interviews with the mother, a daughter, a younger son and an additional interview with the father were conducted. Follow up interviews were conducted with the mother and the daughter. Interviews were conducted with a 34-year-old daughter, a 26-year-old son and
both the mother and father (See Figure 1). Additionally, the original interview with the 36-year-old son as well as all 2004 study interviews were available for coding and analysis. Ability to provide rich, thick, descriptive narrative and to provide answers consistent with interview questions was determined by analyzing 2004 pilot study interviews. These interviews were then re-coded to identify belief related data.

*Figure 1. Family Genogram*
Data Collection

The researcher reviewed the data collected from the 2004 pilot study. In 2004, interviews were conducted until saturation, or the point when the “researcher begins to hear the same thoughts, perspectives, and responses from most or all the participants” (Gay & Airasian, 2003) was reached. It was determined that saturation had been reached when refining questions failed to provide new themes. In total there were 12 transcribed interviews. For the current study, questions were formulated by analyzing interview transcripts from the 2004 pilot study.

Of the 12 transcribed interviews, 3 sets of interviews (6 total) stood out as providing rich descriptive data, and as having an established culture of family storytelling. There were three families that the interviewer identified as being able to provide rich descriptive data pertaining to family storytelling and who were able to answer the research questions as asked without straying from the subject. Of these three families, two families were not available to participate. In one family the father was away on sabbatical and the son had moved from the area. As the mother was not a storyteller there was no one left at home to be interviewed pertaining to the topic. The second family was eliminated as two of the three daughters were not living at home any longer. The researcher decided against conducting phone interviews because in the pilot study interviews being able to accurately read affect had been an important source of information. Additionally, in the pilot study when phone interviews were conducted they provided less descriptive narrative than interviews that were conducted face to face. This left one family eligible for interviewing. The result was that interviews were conducted
with this family’s mother (58 years old), daughter (34 years old), and son (24 years old), as well as a re-interview with the father (59 years old). Transcripts from the father’s interview in the 2004 study were re-analyzed, as well as the interview another son gave (36 years old).

The researcher decided to conduct interviews within one family in a case study approach that offered validity and reliability through triangulation of perspectives. After data was analyzed for beliefs and a question schedule generated, a total of 4 initial and 2 follow up interviews were conducted. Initial interview questions were based upon information gleaned from the 2004 interviews; follow up interviews were based upon questions generated by ongoing analysis of interviews. Follow up interviews were conducted with the mother, father and daughter. The interviews were transcribed using Dragonspeak™ voice recognition software. The primary researcher listened to interview recordings using a transcribing machine. The transcriber spoke each word of the interview into a computer microphone, which allowed Dragonspeak™ to generate a text file. In this manner the interviews were transcribed and Word™ documents of the recordings were created. The Word™ documents were then coded using NVivo software. NVivo™ software was used to code transcripts and group data thematically. Subsequent interview questions and follow up interviews were influenced by the ongoing coding; follow up and probing questions often referred back to data collected from prior interviews. This provided a rich triangulation of data.

Interview Procedure

All participants interviewed were given a consent form to sign before beginning the interview. This consent form outlined participants’ rights. The primary interviewer
then reiterated the participants’ right to refuse to participate at any point in time and requested permission to tape the interview. Additionally, the primary interviewer described that anonymity would be maintained by having only the primary researcher conduct and transcribe interviews, during which process identifying information would be removed so that when peer reviewers cross checked the analysis there would be no personal information to identify participants.

An interview schedule was created based by analyzing 2004 pilot study transcripts for beliefs related narrative using NVivo™ software. Interviews were conducted based upon the interview schedule in Appendix A; additional probing, follow up, and exploratory questions were used to pursue items of interest and to clarify ambiguities. Interviews were scheduled in the interviewer’s home with the mother and father; family responsibilities necessitated that interviews with the daughter and son be conducted in their own homes. Follow up interviews with the mother was conducted in the mother’s home; the mother also provided additional unsolicited information in written form of her own volition. Follow up interviews with the father and daughter were conducted separately over the phone. Follow up questions were used to clarify ambiguous data and to cross check reports of interviewees against one another’s recollections. Initial interviews were tape-recorded, transcribed. Follow up interviews were conducted to answer specific questions; they were not recorded, instead notes were taken. Notes were also taken during interviews in order to record affect and expression of participants in order to analyze responses true to the spirit with which they were given. Questions for the follow-up interviews were based upon the ongoing NVivo™ analysis of transcriptions.
Validity and Reliability

Because all participants were members of the same family, interviews provided a triangulation of data, which in turn enhanced validity and reduced bias (Gay & Airasian, 2003). Internal validity or the truthfulness of the interview was maintained by making sure that interviews were (a) lengthy enough to insure adequate contact with the phenomenon, (b) persistent enough to pursue obvious themes (c) cross checked by a professional peer from my cohort to keep the investigator from inserting bias; this peer came to the researcher’s home to check the coding done on the computer program NVivo™; the peer reviewer came to the researcher’s home to read transcripts in the NVivo™ program and compared her interpretation of their meaning with the interpretations the researcher assigned to them. The researcher herself was available in another room to answer questions, clarify ambiguities, and receive feedback as the peer reviewer read through the transcripts. The researcher stayed in another room and only came to the computer with the reviewer when invited to do so. This was to allow the peer reviewer to take her time and not feel pressured. When a question arose, this peer and the researcher discussed and resolved the issue immediately at the computer. Overall, the peer reviewer agreed with the researcher’s coding. Her feedback pertained specifically to sections of transcripts that fit coding themes and had been overlooked by the researcher. Reliability and validity were further pursued by having transcripts were checked by select participants to ensure that what was being reported is what they actually meant to say; in this study only the mother and father were available to come to the researcher’s home and read transcripts and coding. They both offered feedback on the researchers accuracy of interpretation. The peer reviewer reviewed all transcripts and members checked their own
interview transcripts. Finally, themes were established (Kvale, 1996; Riddick & Russell, 1999).

Data Analysis

The primary researcher was solely responsible for the generation of interview coding and analysis. The primary interviewer supplemented audiotapes with note taking during interviews. Theses notes reflected the primary interviewer’s perceptions of affect and emotion in the interviewee. Notes and coded interviews were used to develop specific questions for follow up interviews. Transcriptions with accompanying notes were read through multiple times before being organized into descriptive categories. Overarching themes were identified. Interview narratives were analyzed concurrently with subsequent interviews so that questions could be adapted and the interviewing process fine-tuned. Memoing was utilized throughout data analysis in order to help create an organized, traceable record of the interviewer’s thought processes. The interviewer reached saturation of themes and meanings for this family through the interview process as indicated by the repetition of answers in the follow up interviews (Gay & Airasian, 2003; Kvale, 1996). Finally, patterns, categories, and overarching themes were established, the phenomenon was described, and assertions were made and reported.
Chapter 4

RESULTS

The purpose of this study was to phenomenologically explore and describe the influence family storytelling has on the formation and transference of beliefs. It was hypothesized that: 1) storytelling strengthens family bonds and connections through beliefs transference 2) storytelling facilitates the creation of individual and familial beliefs and 3) these beliefs either facilitate or constrain the functioning capability of the family and its individual members.

Analysis of the data gathered in this study indicated that family storytelling does indeed influences beliefs within the family system studied. Beliefs appeared to be transferred between generations in ways that affected individual action. Additionally, in this family individual participant’s overall perspective on life appears to have been shaped by the tone and nature of the stories that children are told by their parents.

Information regarding how parent’s used stories and the characteristics of the story, storyteller, and setting was described, and the ways in which these participants and their parents used storytelling with their own children to form and establish beliefs was explored.

*Storytelling Strengthens Family Bonds and Connections*

In this study family storytelling was found to strengthen family bonds and connections. Participants reported feeling closer to their parents and their children as a result of family storytelling. In the words of the 34-year-old daughter in this study,

“My mother spent volumes of time with me, she was the one at home every day after school, and I would go into the kitchen, sit on the
counter and tell her about my day, and she would offer advice or
council, most frequently it came in the form of a story… That’s why I
observe the same pattern with my children, because it was
demonstrated to me that way [and it felt good]… so [my children]
look forward to it [storytelling]. They're really hungry for it. They
know to expect it. They are primed to listen because it is a ritual,
every night. Even the 12- and 10-year-old are looking forward to that,
[and that tells me storytelling is important, its not just an activity for
little kids]. All the children look forward to that time, just to talk and
be listened to.”

It is easy to see that in this scenario, storytelling strengthened this daughter’s bond
with her mother, and is continuing to strengthen her bond with her own children. For this
participant and her children storytelling time was reported as an important way to connect
with family members and to help one another feel loved and supported within the family
system.

The 58-year-old mother in this study recounted that storytelling was the way her
mother helped her feel loved. In particular, her mother used stories to help make her
children feel special and to ease the pain of difficult times. This participant recounted,

“… When my father died, I remember that my mother took me
into a separate room. We are in Utah vacationing and he had a sudden
heart attack. And he was 41, and I came home from a cousin's home.
She took me into my grandmother’s lovely pink bedroom and sat me
on her lap and told me (more or less) the story of why we are here on
this earth. And then told me that my father had passed away. The interesting thing that may have been because of the way she did this, was that I had an absolute sure knowledge that if I live my life worthy I would be with him again. And that really shaped my life.”

For this participant, her mother’s act of storytelling conveyed love and security even in the face of one of life’s most difficult challenges, losing a parent at a young age. Again, family bonds were strengthened. Additionally, this participant’s mother often showed love to her daughter and other children through storytelling.

“She often would take us on a one-to-one basis, and talk to us teach us their stories. Usually about real people. And real things. Not so much fantasy. It was very powerful. [The way she did her storytelling, this particular time and at other times made me feel] like I was really important. She wanted that difficult time to be as positive an experience as possible for me. And honestly, it was a positive experience, I felt close to my mother and my father, and special. …

My mother wasn’t very verbal about saying the words “I love you” but I always knew she loved me [because of] the way she talked to me, that told me she loved me. The fact that she would take time to tell me stories and explain things to me, that was her form of affection. I love my mother, and when I was little she commanded my respect and my allegiance. I remember thinking that I never wanted to do anything to dishonor my parents or hurt them in any way.”
Not only did this participant receive feelings of love, acceptance and security from her mother’s storytelling, she linked storytelling to the strong feelings of admiration, love and loyalty she felt then and continues to feel now towards her mother.

The 59-year-old father in this family reported that the stories his father told him when he was a child among other things “connected me with my father.” This participant’s father was a police officer and would share stories around the dinner table from his workday. This helped the participant to feel more deeply connected to his father. He stated,

“I loved and admired my father. I think he had great courage and integrity. His stories reinforce that… I was just always delighted to listen to his tales of the day … It was always very entertaining.”

This participant reported using stories to deliberately connect with his children. He related that he had always felt connected to his father through storytelling and wanted his children to have the same experience. In his own words,

“[I have always been] aware of the impact it has it in forging closeness and opening lines of communication, bringing insight to kids. So I believe in it. I think the great thing that great mechanism for parents.”

These data appear to confirm the hypotheses of this study by showing that storytelling was instrumental in forming and maintaining family connections for this family. Additionally, the data further show that storytelling facilitates the transference of beliefs in a family; beliefs that either constrain or facilitate individual and family functioning.

*Transference of Facilitating Beliefs*
Another hypothesis of this study was that beliefs and values would be transferred from one generation to the next. Participants reported that their belief systems were formed in part through parental storytelling. Further inquiry into how beliefs were formed and what effect they have on participants provided testimony that the stories participants heard as children affected their belief systems and influenced their behavior. The 58-year-old mother in this study stated that as a child, her mother always told a made up story about an adventuresome doll, and personal stories the “big adventure moving to Washington D.C. in a time when people did not move out of their home towns.” This participant stated,

“…when my mother told us [the doll] stories, all through that story, she taught us to seek adventure, and that influenced my life. I sought adventure with my husband and looked forward to and enjoyed his career in the navy, and all the traveling, [and] … from her story about moving to Washington D.C. with my father, I learned to go where your advantage was and not be afraid to leave home. These stories taught me what my mother expected of me, and … that influenced where I went to college, and other choices.”

This indicates that the daughter’s self reported beliefs to “go where your advantage is” and that “adventure is good” were formed through her mother’s storytelling. The 34-year-old daughter reported that the stories she heard from her parents dramatically affected her belief that you should not stay in a situation where you feel a spiritual warning that there is danger. Having heard the story of how her mother obeyed a
prompting to leave a movie theater because she felt she was in danger, this participant stated,

“I was able to [leave a situation I felt was dangerous], even though normally I was quite shy and would never have insisted on doing something so bold. Hearing my mother’s story … taught me not only to believe in and listen to promptings, but also to act immediately on them.” This participant stated that she tells this story along with her mother’s story to her children to influence their beliefs. She stated wanting them to understand how the Holy Ghost works and that “stories are vicarious experiences so my children can learn how to [believe and obey] when they are questioning how to recognize the Spirit.” For this participant, storytelling is “a way of saying this is real, and here is how it happened in my life.”

This 34-year-old daughter also reported using storytelling to influence her children’s beliefs and subsequent behavior. With one child she used storytelling to change her child’s beliefs about succeeding in school and preparing for college. “My daughter had always been [uninterested] in school. Instead of getting on her case, when she was in 6th grade I began telling her about my college experiences, … how fun they were, and how I treasured them… I also shared the decision I had made in high school that I was going to work hard now, so someone else would pay for my college and I wouldn’t have to work as hard later. … Slowly my daughter started showing an interest in college and connecting her work in
school to what kind of experience she could expect to have in the future. Now she does well in school and I … don’t have to [make her] achieve.”

This participant also reported using storytelling to answer her children’s questions, as she believes that this style of communication is “less threatening for them, … and lets them make their own thoughtful decisions.” She related an instance where her daughter was having trouble with friends at school. Instead of telling her daughter what to do, this participant

“told a story about when I was in school, and how hard it was for me and how I handled it. Instead of telling my daughter to do something she didn’t really want to do, I told the story and my daughter made her own decision to do a hard thing.” This mother told stories and transferred the belief that education is important to her young daughter.

Participants reported many instances of intergenerational beliefs transference. For example, the daughter stated that her beliefs about making marriage work were altered through the stories her father told her.

“I no longer felt [scared] because all my friends’ parents were divorcing. I thought it could happen to anyone. When my dad told his stories, I learned that people have control over whether or not their marriage would break up, it’s not a fluke, something you can’t control. … [Those stories] made me feel empowered, that I was in control as long as I was willing to learn skills and apply them … the stories I
remember most were the ones that created within me a feeling of empowerment, of being in control.”

According to her own reports this participant felt empowered, and believed in her own ability to affect the events of her life. These stories gave her a lifelong belief in her own power.

The 58-year-old mother in this study reported that her religious beliefs were the lens through which she views life, and that they had been “created, … strengthened and … influenced” by her parent’s storytelling.

“When my father would tell [family history stories] … that was very powerful, I felt a real responsibility to live up to my heritage. I never wanted to do anything to dishonor my mother and father. These stories strengthened my [religious] testimony, and … shaped how I look at the world in general [whether she sees the glass as half empty or half full].”

The father in this family sums it up when he said,

“[the stories] were building blocks, the accumulated values that are highlighted in different ways that are talked about, [daily], around the table. Insight [gained] from stories, … all that gets sort of woven together and makes a general outlook, or approach to life.”

Whether it was shaping a young wife’s decisions of where to live or empowering a normally shy daughter to assert herself in a scary and intimidating situation, the stories these participants recalled were able to facilitate their ability to function in every day life. Additionally, storytelling
shaped so many individual paradigms that individual belief systems became more optimistic. These participants had positive, beliefs altering facilitating stories told to them, and as a result they reported having developed positive, optimistic world views.

_Serendipitous Findings: the “How” of Parental Storytelling_

_Storyteller Characteristics._ Analysis of interviews indicated that there were two main characteristics that allowed the parental storyteller to have an impact on their listening children. All participants reported the importance of not manipulating the listener through storytelling. Additionally, it was reported that parental attenuation was essential; stories would not be effective if told at a time when the listener was not physically or emotionally ready to hear them; these parents reported “timing” their stories based on their ability to attune to their children’s physical and emotional readiness to listen and absorb.

_Crafting the story vs. “manipulation.”_ In this study participants used the term manipulation; this term, however, is better explained when manipulation is defined as a measure of coercion. Participants repeatedly reported

“I was just telling a story … teasing out the lessons … but just making it interesting… I wasn’t trying to prove a point … my father just told interesting stories, … but I learned from them.”

The father related,

“I wasn’t calculating to teach and influence them, as to just talk about what happened that day. … It was more to just share something interesting. I teased out lessons to be learned in each story, what
insight that might be helpful to them, but it wasn’t like I calculated …

it just kind of happened naturally. I was just talking about the things
during my day and that [were] interesting to me. And I was aware that
they were there and listening so that changed what I talked about.”

It is interesting that the father talked about not calculating his storytelling and
yet described “deliberately teasing out” lessons and “changing what he talked
about.” For this participant there was a clear difference between crafting a story
and hoping to get the point across and trying to manipulate or coerce the
listening child. When crafting a story, a non-coercive non-manipulative
storyteller hopes for a particular outcome, whereas a manipulative storyteller
tries to force an outcome or belief upon their listening children.

Attenuation. An important factor in being able to connect through family
storytelling was the parent’s ability to attune to the needs of their children. Participants
used language that indicated that they were able to ascertain the best times and situations
to present beliefs altering stories to the children. As the 34-year-old daughter indicated
during a follow up interview,

“Storytelling is most powerful when the person being told the story
has a question, because they are looking for guidance, … a different
perspective… so at that point, if I share stories, that person is open to
having their minds changed or their beliefs altered.”

Participants in this study were acutely aware of the importance of timing for
allowing stories to have a maximum impact. For the 58-year-old mother, timing
was important
“...because [the right timing] made it easier for people to hear and [not feel] singled out.”

Timing is important to stories having an impact on beliefs because as she put it,

“ I think a lot of people rush in to give a lesson when the child is upset, and [at that point the child] is not open to being taught or hearing the lesson. It can be some time before the [child is ready] and you just have to read [the situation]”

It appeared that when parents told intentionally crafted stories and hoped their children were influenced, personal beliefs can be transferred, and actions influenced.

Participants also reported that storytelling was by nature “on their level, and inherently allowed the parent to “put things on the child’s level.” As the 58-year-old mother put it;

“as a small child I didn’t realize this [that they were teaching me through storytelling], but she taught me [through her stories] … and the belief was formed.”

Parents reported “role-playing and using a lot of made-up stories to teach a principal … [doing] a lot of fun things [with storytelling] to change behavior.”

The father also reported

“making the [story] characters … childlike, but … dealing with real life experiences. The characters were dealing with things that our kids
could relate to … it had an effect on them because it was on their level.”

Participants also stated that the vicarious experience created by storytelling was particularly effective in influencing beliefs and behavior. Because of this, participants who had children old enough to tell stories to, reported deliberately seeking to

“have their children learn lessons without having to go through the experience.”

It appeared that storytelling to the child’s level made otherwise sticky situations more palatable. All participants agreed with the mother’s statement, that storytelling “made teaching lessons about behavior easier for the kids to hear and learn from… without feeling singled out.”

The 58-year-old mother reported,

“I try to find the right time [to tell a story]. It has to be the right time. For instance, if a child has made a mistake, and does something wrong, I don’t always tell the story then, unless they are open. If they are upset or whatever that is not the right time. I try and find the right time. I think and wait for impressions to know when that is.”

As has been stated, parents were very deliberate about the stories they told, not only in creating the stories, but in timing their presentation to their children. This required the use and creation of daily and weekly storytelling times. Mother, father, and daughter reported that “ritual” story times “allowed children to be open to the lessons in stories.”

Nightly rituals were reported as suitable for young children, (“our kids are hungry for
nighttime story times”) and afternoon rituals were more conducive to storytelling with teenagers. The two sons did not have children old enough to tell stories to. However, the daughter related,

“after school was a special time to connect with my mother. She listened to me and I listened to her. Instead of giving advice, she told stories. I try to do the same with my kids.”

Additionally, participants reported weekly family nights were times for special stories.

“Every week our mother and father would gather us,” and “[the weekly family ritual] was fun, … it was a non-threatening way to [teach through storytelling].” From this it can be seen that for this family, ritual was an important foundation for storytelling. Sometimes lessons were transferred during the storytelling ritual, other times because the children were accustomed to listening to stories teaching moments occurred outside of the ritual format.

Ritual. Further exploration in the current study revealed that the ritual was a common element in belief changing storytelling. Often the story was told during a time of day or day of the week that was a special time set aside for the exchange of stories. With small children, bedtime was the ritual storytelling venue. For teens, the after school hour was cited as a time for sitting in the kitchen talking with and listening to stories told by mother. As the daughter stated

“I remember coming home, and my mom was always doing something in the kitchen, and I would sit on the counter and we would talk … it
was really important to know that I could always have that one on one time.”

Deliberately creating times set aside for storytelling appeared to make beliefs transfer more effective, mainly because this effort on the parent’s part to create special story times “conditioned the kids to listen. It was expected.” The father further stated that making the stories interesting increased the listener’s desire to listen. Reports from participants include

“All those stories [that my dad told at the dinner table every night] were riveting,” “[for storytelling to be effective] you have to make it interesting,” and “hearing about real life stories made it real, and that was interesting.” Additionally, parents of older children created time for children “to listen to stories, but to also tell their stories, what happened that day … and to ask questions.”

It appears that making space in family life for sharing stories is essential if one wishes to influence beliefs and behaviors. As one parent stated

“[listening to our kids] greased the skids in the opposite direction, so they would listen to us.”

In having successful rituals, a definite time was essential. The storytelling rituals could occur nightly at bedtime, every day after school, or just once a week, but each circumstance was a special time set aside just for family and for storytelling. This laid a foundation for stories to be a part of the family culture; specifically a part of the family recreation and learning culture. Beliefs transfer did not occur exclusively during rituals,
but ritual storytelling seemed to be a necessary “grooming” activity that laid a foundation for children to be able to absorb beliefs.

Real life stories. Often stories children were listening to from their parents were real life stories. This appeared to make them more appealing. The mother recalled “my mother told stories about things that really happened to her, and that made it so interesting,” she also “told stories about our ancestors, and that was very powerful.” The daughter reported, “I tell my kids real life stories that are related to their problems … I’ve shared negative examples too. I tell about situations [similar to theirs], I say, “all this happened to me, and this is what I did, and how it turned out, and this is how I felt later on. It was so much less threatening for my children to hear of my experiences and then draw their own conclusions.”

The father stated, in recalling stories his father told, “the fact that [these stories] were from real-life, that they were real, and the lessons he learned from them were real … made them powerful… to see how they played out and that they were true.”

Even in telling real life stories however, each of the storytelling parents said that they are careful to deliberately craft their stories, or “tailor [their] stories to be biased in one direction or the other.”

Family storytelling model

Figure 2 represents the flow of storytelling in a family setting. The larger circle represents the family context in which stories are told. Significant
influences in this context are timing, attunement, salience to the child, personal stories, and made-up stories. One arrow represents the repetition of the stories in this context. The other arrow leads outside of the family context into situations where the stories are recalled and used as a template to make decisions, and where the story has an influence on behavior long after it has been told. The listener must have either been so impressed by the story and its presentation, or have heard the story so often that it comes to mind in a life situation. Once the listener recalls the story and applies its message, the course of that listener’s beliefs and actions have been directly affected by the story. This listener then has an additional “addendum” to add to the original story which he or she may then use when re-telling the original story to future generations.
Figure 2. Family Storytelling Theory

FAMILY CONTEXT

STORYTELLING
Timing
Attunement
Salience to child
Personal stories
Made-up stories

RECALL:
Applicable Life Events

APPLICATION
& Memory Storage

RE-TELLING to Other Generations

REPETITION
Chapter 5
DISCUSSION

The results of the findings of this study culminated in the definition of storytelling in the family as depicted by the model in Figure 2. After data were reported, it was evident that each of the specific findings served a function in a cyclical model of family storytelling. Analysis of the 2004 and 2006 interviews revealed that stories told to young children become stored in memory through two avenues. Either they are repeated enough to never be forgotten, or a pertinent life event even occurs. At the time of a pertinent life event, the child recalls stories that pertain to the situation they are currently in and apply the beliefs embedded in the story to problem solve their current situation. Such application not only leads to the story being stored in the child’s long term memory, but the original story plus the story of applying the story to solve the problem become part of an oral history that then gets fed back into the family system and becomes part of the family’s identity and memory as a whole. In this manner stories told to one generation have the ability to affect not only the original listener, but to change beliefs and behavior across more than one generation.

*Storytelling Influences Beliefs and Actions*

Results of this research seem to support the idea that storytelling can influence beliefs, which in turn affect personal decision-making and action. The examples given in this study indicate that certain stories are empowering and can enable an individual to act in difficult situations. It is certainly possible that the vicarious experience that storytelling provides allows listeners to build efficacy to act in a kind of “mental role play.” This finding is in line with Fishbein and Azjen’s theory of Learned Action Reasoned Behavior.
(Ajzen & Fishbein, 1980) which posits that beliefs and thoughts precede action. One participant in this study reported acting out of character and standing up for herself in an uncomfortable situation because of a story she remembered her mother telling her. This same participant reported using stories to successfully change the study habits of her daughter.

Though participants in this and the 2004 pilot study reported only positive belief-influencing stories, it is highly likely that stories have the power to have a negative influence on beliefs and actions. Further investigation is warranted to confirm and comprehend the characteristics of more negative storytelling styles.

*Storytelling Shapes Personal Paradigms*

It was clear that the participants in this study believed that their worldview was shaped by the sum of all the stories their parent’s had told them. This finding is interesting in light of Seligman’s findings (1992) in the area of learned optimism. Seligman found that people with optimistic outlooks enjoy better health and a greater degree of success in personal and professional areas. It seems clear that optimism and pessimism are cultivated by the quality of the stories people are exposed to in their families of origin. It may be that the tone of the stories we tell our children influence whether or not they become optimistic or pessimistic individuals.

Participants in this study stated that storytelling “shaped their outlook on life.” For one participant, the stories his father told around the dinner table were “riveting and exciting.” This participant stated, “I loved and admired my father. I think he had great courage and integrity. His stories reinforced that. I was just always delighted to listen to his tales of the day.” This father was also a participant in the original study, and analysis
of those interviews revealed that hearing his father’s stories every day over the dinner table influenced this son’s view of his father. Those dinnertime stories caused this participant to see his father as possessing positive characteristics worthy of being emulated.

It appears that storytelling has the power to shape children’s beliefs about who their parents are and how they feel about them (Gagalis-Hoffman, 2004). Interestingly, in follow up interviews, this participant’s son and daughter stated how much they admired their father for his integrity; his son stated that he remembers vividly being aware of his mother’s admiration for his father’s integrity. It seems that though this participant did not state it himself, his father’s stories influenced how he viewed the world enough to have a part in shaping his behavior across the lifespan. While further research specific to this question may be warranted, enough evidence exists to warrant application to marriage and family therapy. A prescription of specific “optimistic” beliefs facilitating parental storytelling may positively affect a child afflicted with anxiety. Similarly, it may be possible to counteract the negative affects of divorce through guided parental storytelling where the parent is coached by the therapist to tell specific stories chosen for their possibility of shaping a child’s outlook.

*Using Family Storytelling as a Therapeutic Intervention*

The value of metaphor to facilitate therapeutic change has long been recognized by marriage and family therapists (Rosenblatt, 1994; Minuchin & Fishman, 1981). Entire books have been written on how to therapeutically tell stories and metaphors to children (Dwivedi, 1997; Gersie, 1997; Gardner, 1993). It is possible that storytelling by parents could be as powerful an intervention as storytelling in a therapeutic setting, with the same
kind of beliefs and behavior altering outcomes. Certainly the necessity for attunement by
the parent to the child’s needs would facilitate attachment (Barth, Crea, & John, 2005),
which in turn promotes emotional health in families. Therapists would need to evaluate
the parent’s ability to connect and attune with their children in order ascertain how much
improvement in the four elements of successful family storytelling (see flow chart page 41) the parent would need training in. The positive side to this is the non-threatening
fun atmosphere of family storytelling. Instead of the parent perceiving a therapist’s
admonition to be more attuned to their child as a criticism, it may be perceived in a less
threatening way as just a skill to help them learn to storytell. The side benefit of course is
that these skills are essential to secure family attachments (Johnson, Ketring, & Rohacs,
2006). Further research is needed to test these hypotheses.

Future Research Recommendations

As mentioned above, further research is needed to gain insight into the application
of parental storytelling in a therapeutic setting. A storytelling curriculum needs to be
developed and tested on parents with children in a clinical setting. Additionally, further
research is needed in several areas. First, this study and the pilot study specifically
focused on investigating families with an existing culture of positive parental storytelling.
Further research is needed to ascertain the affects of negative parental storytelling as well
as the effects of no parental storytelling on a family system. Is there a function that
storytelling serves exclusively? Is cohesion directly correlated with the amount and
nature of family storytelling? These questions and others will need to be answered in
order to fully understand and successfully apply the phenomenon of parental storytelling
in a clinical setting.
This study was conducted with adult participants recounting their childhood experiences. This was a deliberate attempt to gauge the long-term affects of storytelling to affect beliefs. After determining that storytelling does indeed affect beliefs in several significant ways, questions posed to participants were geared towards understanding the phenomenon of storytelling in order to enable therapists to use storytelling as an intervention with their clients. After pursuing this line of questioning, it became obvious that some elements of storytelling are intuitive, or performed unconsciously by the storyteller. It is possible that observing the actual phenomenon of belief-altering storytelling between parents and their young children may provide information the insight needed to identify the unconscious elements of storytelling in order that they may be understood and used in therapeutic interventions.

This study sought to define the way beliefs are formed and influenced in families with a culture of storytelling. However, since this study was limited to a single family of homogeneous religion, economic status, and location these results cannot be generalized without additional research. Additional research should also include populations of families that tell negative rather than optimistic stories, as well as families in which a culture of storytelling does not exist. Research into these areas may provide insight and serve to further delineate the role of storytelling as a vehicle for family beliefs transfer.

Conclusion

Storytelling is a recreational activity that promotes family bonding and teaches family values. In this study family storytelling was found to have the ability to powerfully change beliefs and thereby influence actions. The main finding of this study was positive power of storytelling and its ability to promote facilitating beliefs. Beliefs
were found to be transferred between generations through storytelling. In addition to promoting facilitating beliefs, storytelling was found to influence “facilitating paradigms” that permeate the outlook of the individual. Given the potential for family storytelling to alter beliefs and create belief facilitating paradigms, using storytelling as a therapeutic intervention may give marriage and family therapists a powerful tool for helping families strengthen bonds, create facilitating beliefs, change behavior, and best of all, just have fun.

Finally, storytelling is a complex activity; its ability to influence beliefs systems is determined by a variety of characteristics of the story, storyteller, and the listener. Some of these characteristics are readily discernable; some are discernable only to those involved. It is important for the clinician using storytelling to therefore be acquainted with the characteristics of beliefs changing storytelling, and guard for behaviors and characteristics in participants that will cause the storytelling intervention to be less successful. As clinicians begin to use family storytelling as an intervention, further research will be necessary in order to determine the best way to teach these techniques and to help clinically distressed parents and children gain the full potential therapeutic benefits from family storytelling.
References


Appendix A
1. Talk about your definition of beliefs, a time you remember a belief being formed, preferably through family storytelling if that comes to mind. How was it formed? Why were you influenced?

2. Describe storytelling in your family of origin and in your family now. From your life, describe a time when a story influenced you. How? Why? Who told it? What made it powerful?

3. Have you ever used storytelling to influence beliefs of others? How? What are some important factors to making it work?

4. Look at lifespan development chart and describe storytelling that influenced beliefs at each stage.

5. What are some critical factors in powerful storytelling the kind that influences beliefs? Describe this.

6. Who was the most influential storyteller in your life? Why? What stories do you remember? How did they influence you and your beliefs? Why?

7. Any other influential stories you recall being told or telling? Tell me about them, what made them influential, and who and how did they influence?

8. Anything else about beliefs and power of stories to influence them?

* These questions were the baseline from which other questions were asked and follow up questions were formed.