

## CHAPTER I



# The Magic of Metaphor

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### WHY TELL HEALING AND TEACHING STORIES TO KIDS AND TEENS?

Do you remember what it was like as a young child to have a parent or grandparent sit on the side of your bed at night and read a story that gave you permission to journey into your own fantasies? How the magic of the story engaged you, entranced you, changed you into a different yet somehow familiar character, and took you into experiences you may not yet have encountered? How, in the process, you discovered something new about yourself, felt the emotion of reaching the tale's conclusion, and shared a special intimacy with the teller?

From time immemorial, stories, legends, and parables have been effective and preferred methods for communicating information, teaching values, and sharing the important lessons of life. Just hearing those often-expressed four words "*Once upon a time . . .*" is like an instant switch from reality to pretense or to an altered level of processing. They are like a hypnotic induction, an invitation to participate in a unique relationship with both the teller and the story's characters. They are words that invite the listener on a journey into a world of imagination where reality may be suspended, and learning can be potent. They are an invitation into a special realm of experience where listeners are entranced, attention is focused, and one can share the emotions of the fictional hero. They invite participation in a relationship in which teller and listener share an interactive bond.

Stories have many important characteristics of effective communication:

1. They are interactive.
2. They teach by attraction.
3. They bypass resistance.
4. They engage and nurture imagination.

5. They develop problem-solving skills.
6. They create outcome possibilities.
7. They invite independent decision making.

In these ways they replicate many of the characteristics we seek to create in our therapeutic relationships with children, for as we engage in the process of listening to stories our relationships with self, others, and the world at large are likely to change. While we may or may not notice it, the sharing of stories can build relationships, challenge ideas, provide models for future behavior, and enhance understanding. In the characters and teller we may see some of ourselves and be influenced, little by little, by their attitudes, values and skills. It has been said before that once we have heard a story we can never unhear it, that something may have changed forever. Thus, stories are a logical and productive means for therapeutically communicating with kids.

### **A BRIEF HISTORY OF TEACHING TALES**

From long before our ancestors began to paint on the walls of caves, chisel symbols into stone, or print words on paper, elders have passed stories on to younger people. Perhaps some of the oldest living tales can be found in the legends of the Australian Aboriginals. One that provides an explanation of natural phenomena such as fire, stars, and crows, and has a strong moral message, begins with seven women who control fire, and Wakala, a man who manipulatively steals the control for himself. Now powerless, the women flee into the sky, becoming the constellation of the Seven Sisters, while Wakala selfishly refuses to share his fire with anyone, mocking them by calling out, “Wah, wah,” whenever they ask. In a fit of temper he throws coals at some men who ask, starting a wildfire in which he himself is incinerated. As the men watch, his corpse is transformed into the blackened body of a crow, flies into a tree, and sits there calling “Wah, wah.”

Through such seemingly simple tales, elders communicated to the younger generation messages about not stealing, being selfish, or losing your temper. Through stories they shaped the ideas, beliefs, morality, and behavior of a whole culture, generation upon generation. Telling children stories is as ancient and entrenched as the history of communication itself.

San Diego-based psychologist Michael Yapko, in writing about effective methods of communication with hypnosis, claims that “Stories as teaching tools have been the *principal* means of educating and socializing people throughout human history” (Yapko, 2003, p. 433; italics added). Over time and across all cultures they have been used as a form of effective communication and education, passing on from generation to generation the attitudes, values, and behaviors necessary for survival and success in life. Stories like the biblical account of creation, the Australian Aboriginal dreamtime legends, or the myths of ancient Greece explain how our world came into being, how human beings were created, and where animals came from. We, as a species, have used stories to explain our world and its origins. These stories help us to define and understand much of what otherwise might be unexplained. In so doing, they also enable us to *create* our world. If our stories of the world are based on creationist theology, we may live our lives with fear of damnation to hell and desires of reaching heaven. If our stories of the world are about the interconnectedness of all living beings with the planet, we may tread gently and with respect for both the earth and its creatures. If we are brought

up on stories about animosity and hostility between religions and cultures, we may be more prone to conflict with our neighbors and, thus, destined to a life of hatred. As our stories define the world for us, so we are likely to see it . . . and create it.

Just as stories explain, so they can teach about values, standards, and acceptable patterns of behavior. They educate us in how to cope with the situations we are likely to experience in life and how we can best manage the challenges that lie ahead. Imagine, if you wish, ancient hunters coming home from a day chasing and capturing a wild beast. As they sit around the fire at night, roasting their freshly caught meat, they communicate the tales of their activities, describing the successful strategies they used, detailing the events that caused one of their members to be gored or injured. In this way they are sharing their experiences with the young people of the tribe who sit there listening to the tales, learning the things to avoid and the things to ensure a successful hunt. These stories short-circuit our learning processes. The wide-eyed children listening to the hunter's tales do not need to have trapped wild animals themselves to learn about those processes that work and those that do not.

The power of stories to communicate effectively has meant that they are, and have been, the preferred medium of some of the world's most renowned teachers. Jesus and Buddha did not lecture; instead, they used parables. Sufis and Zen Buddhists are renowned for their profound teaching tales. Although the Bible provides us with some very direct and prescriptive instructions, such as the Ten Commandments, its main form of communication is in the relating of stories. Indeed, storytelling has been the universally preferred style of teaching through which to pass on life's important lessons from generation to generation.

Whether for learning or entertainment (and perhaps there is no clear distinction), we crave stories. We buy books, visit libraries, and read tales of fiction or fact. We go to plays, the ballet, and the opera to relive familiar classics that have survived the centuries. How many times have we heard the story of Romeo and Juliet, yet still find the ending tragic each time we experience it? As much as we are entranced by the old, so we seem to crave the new story line as well. Teenagers watch the stories of pop songs acted out in video clips. Children, adolescents, and adults are entranced by movies that visually and audibly spin a story of suspense, romance, or humor, turning actors—our modern-day storytellers—into folk heroes and role models.

Stories are an integral part of life. Through the ages, they have been an inseparable part of human culture, learning, and values. Regardless of our language, religion, race, sex, or age, stories have been, and will remain, a crucial element in our lives. It is because of stories that our language, religion, science, and culture exist. Stories may fulfill our dreams; and, indeed, our dreams themselves are stories. They accompany us throughout our existence, from cradle to cremation. As one of Salman Rushdie's characters said in *The Moor's Last Sigh*, "When we die all that remains are the stories." If life and stories are so mutually embracing, then their adaptation into counseling and therapy is both a logical and practical extension of an established and effective medium of communication.

## HOW STORIES INFORM

Dappled sunlight sparkles and twinkles from a mysterious source partially obscured by fern fronds and gum leaves. Wide-eyed and excited children rush forward into the bushland reserve, enveloped by the sights, sounds and smells of the bush—birdsong, water gently cascading over

rocks, silver-gray gum leaves rustling overhead and then they see her—a vision of glitter and rainbow hues, a beautiful bush fairy with jeweled wand hovering on a ledge of mossy sandstone by the creek. The children are mesmerized by the tantalizing spectacle. The fairy smiles and invites them to join her for a bush walk. How could they resist?

But first, fairy uses her wand to scatter magical fairy dust over the participants to focus on each sensory modality (sight, sound, smell, taste and touch). The magic is to enhance the sensory experience, to encourage and challenge them to see and hear more, to search beyond the obvious and to engender wonderment. The children respond immediately with “sightings”—is that a possum tail dangling from the tree? What bird is that? Why is that leaf speckled and twisted? Where has the spider gone from the web? What was that rustling in the long grass? Is that more fairy dust sprinkled near the fungi? So much excitement, anticipation, questions. The children are engaged through their senses into heightened awareness and valuable interaction has begun. (Lalak, 2003, p. 72)

For the past six years Nadia Lalak (2003; Eva & Lalak, 2003), a psychologist, landscape consultant, and environmental educator, has enchanted schoolchildren with environment-oriented fairy stories. Her project aims to raise environmental awareness, inspire ecological consciousness, facilitate an enhanced experience of landscape, and develop a child’s sense of place in the world. Local resources, such as bushland reserves, are used to provide children with a direct experience of an easily accessible, natural world. Through tales of the bush fairy, the children develop an understanding of the landscape, nature’s interrelationships, and the impacts of urbanization.

Lalak bases her approach to informing environmental awareness on the Confucian proverb that says,

Teach me and I will forget.  
Show me and I remember.  
But involve me and I will understand.

For her, stories are an integral part of that process of involvement of children in understanding information. She says, “Away from a classroom and whiteboard, children respond enthusiastically to creative interpretations of landscape and ecological issues and the opportunity to be involved in magic, mystery, storytelling, role-playing, environmental games and fun” (Lalak, 2003, p. 73).

## **HOW STORIES EDUCATE**

Imagine for a moment that you are attending your first week of school and your teacher tells you, “One plus one equals two,” while writing some strange symbols on a board. Now imagine a different teacher who says, “Jill got home from her first week at school. She was feeling tired and hungry, but no sooner had she stepped in the door than she could smell the cakes Mom had been freshly baking. Before she had a chance to ask, her mother said, ‘Would you like a cake?’ Excitedly, Jill munched her way into the still slightly warm cake. When she finished she was still hungry, so she asked, ‘Can I have another, please?’ ‘What?’ replied her mother. ‘You have eaten one cake. If you have another

that will mean you have eaten two cakes.’ One cake plus another cake equals two cakes. And that is exactly what Jill ate.”

Which lesson has most meaning for you? Which involves you—and your senses, experiences—more in the learning process? With which do you have greater association, or find your attention more absorbed?

Learning skills in therapy follows similar processes as learning facts in school. Let’s say you have a young enuretic client and you choose to take a behavioral approach to managing the case. You can instruct the child and his parents in strategies such as “Do not drink for a certain period before going to bed, empty your bladder before going to bed, retain your urine as long as possible during the day,” and so on. You could recommend an enuresis alarm with prescribed instructions for its use. You could give your suggestions very clearly and directly.

Compare this to telling the child a story: “Andy was a boy I saw not very long ago. He felt embarrassed to talk about his problem and I guessed he felt a little different or odd. He didn’t know anyone else who wet the bed—or not any who had told him so, anyway. It felt uncomfortable to wake up in a cold, wet bed every morning. He hated having plastic liners on his bed when his sister didn’t. At times she teased him. He couldn’t sleep over at his friends’ houses when other kids did and he feared they would tease him, too, if they knew. His parents had told him it was time he grew out of it. They said they would put sticky stars on the calendar in his bedroom for each night he was dry, but he never got any. They offered him extra pocket money for dry nights but still it didn’t work. He felt bad, like it was his fault. He wanted to please them but nothing seemed to work and he didn’t know what else he could do.”

Having thus set the problem and, hopefully, gained the listener’s involvement, you can start to describe the choices that Andy had *available* (i.e., the behavioral steps that you could have given in a more direct but perhaps less readily accepted form). Maybe describe the choices Andy *made*, offer suggestions, perhaps with some humor (“Would it have helped for him to stand on his head all night?”) or ask the listener for suggestions (“If standing on his head wouldn’t work, what else could he have done?”). An example of how this can be done is provided in Story 26, “Learning New Tricks.”

## HOW STORIES TEACH VALUES

Recently I led a group of colleagues on a workshop/study tour of Bhutan, a high and tiny Himalayan kingdom north of Bangladesh and south of Tibet. While there, I was interested to discover that this is a country with an unofficial national story. The Four Faithful Friends is the country’s most loved story, told to the young and repeated among the mature. It hangs as a painting in many homes and is depicted on the walls of temples, public buildings, medical clinics, and even banks. It was a mural above the headboard of the very first hotel bed in which I slept.

The story as I have told it in “The Four Faithful Friends” (Story 34) may not be the same as one you’d read in a book of Bhutanese folktales or hear told by a local. That is part of the fascination with the oral tradition of storytelling, in which the details of tales may vary depending on the teller, listener, context, and intent with which it is told—while still maintaining the essence and integrity

of the message. Knowing this, and using this, will help contribute to your skills as a teller of healing stories.

“The Four Faithful Friends” tells of a pheasant, a rabbit, a monkey, and an elephant—four unlikely associates—who find a seed and combine their abilities to plant it, cultivate it, and, eventually, harvest the fruit. It is a tale that teaches the values of cooperation, using your abilities, helping others, and harvesting the fruits of your mutual efforts.

There are similar tales for communicating social values across many cultures. The aboriginal tale mentioned earlier of Wakala’s stealing, expressing anger, and being selfish is one such value story. From your own cultural background it may be possible to recall the stories with which you were brought up. One for me that has a somewhat parallel message to the Bhutanese Four Faithful Friends was The Little Red Hen—but the means the two stories provide for getting there are almost polar opposites. The tale of the Little Red Hen tells you what will happen if you *do not* cooperate. Failure to lend a helping hand when the hen requested assistance meant her barnyard peers were punished by being denied the freshly baked bread. Conversely, the Bhutanese story of the Four Faithful Friends talks of the benefits that you *will* gain through the positive action of cooperation. It emphasizes the values that can be derived from mutually caring relationships, instead of the negative aspects of not caring for others.

Table 3.1 in Chapter 3 lists some examples of classic value stories, their authors, and the values they contain.

## HOW STORIES DISCIPLINE

Stories have long been used not only to shape behaviors but also to present listeners with the disciplinary consequences of compliance and noncompliance. Live a good life, say the traditional stories of Christianity, and you will be rewarded with a heavenly eternity; but fail to follow the teachings of the faith and you will be punished with damnation in hell. Be good, we teach children in tales of Christmas, and Santa Claus will bring you presents—but misbehave and you face the prospect of a season devoid of presents. Do not steal or be selfish, says the Aboriginal tale of Wakala, or you could be turned into a crow. Help out a friend in need, or miss out on the rewards, says the story of the Little Red Hen. Many such tales teach not just the socially or personally appropriate behaviors in which to engage but also the consequences of failing to do so.

Effective skills in discipline are seen as one of the key parental ingredients in determining that a child does not experience conduct problems (Brinkmeyer & Eyberg, 2003; Dadds, Maujean, & Fraser, 2003; Sells, 2003). Yet, in an age when governments talk of banning spanking, threats can be seen as emotionally abusive, nagging is ignored, and harsh disciplinary action can see a child-carer facing litigation, what is a parent to do? Mothers in Nepal have resolved this problem by customarily avoiding the use of corporal punishment such as smacking (Sakya & Griffith, 1980). Yelling or screaming at errant children is frowned on. So how do they discipline their children?

The control of childhood behavior comes in the form of stories. To keep a child quiet, or to dispense discipline, children are told fearful stories of terrifying characters who may be humans, animals, ghosts, or evil deities. Given our cultural perspective, we may or may not agree with this practice. From a background of current Western attitudes to child rearing, it may sound cruel or even emo-

tionally abusive to tell children tales of terror; but for Nepalese parents it may seem equally cruel for children to watch violent TV cartoons without any clear moral message or disciplinary function.

The practice of using tales as a primary method of discipline is described here, not as a question of what is right or wrong (depending on our cultural view), but to illustrate two points. The first is to portray the way that stories are used traditionally in cultures other than our own. The second is to highlight the power they may have in the control of behavior—a factor relevant to their therapeutic use.

## HOW STORIES BUILD EXPERIENCE

One of the things that differentiate children from adults is their level of experience. For a young child, life's experiences are still few. The older we get, usually the more experiences of life we encounter; consequently, one of the major roles of parents, teachers, and therapists is to provide the sort of experiences that are going to equip the child for what lies ahead. This is one of the basic processes of learning for our species: We learn through experience; experience is one of the best teachers; the more we experience, the greater our potential to learn; and the greater our ability to handle life's various, challenging situations.

Some of the experiences of childhood are positive: the intimacy of suckling on a breast, the smiling face of a parent looking at a young child in a crib, times of play, or the discovery of a new ability like standing on your feet for the first time. There are also experiences that may be negative or unpleasant: death or separation from a parent, an environment of conflict or hostility, the pain of illness, or rejection by peers. The way a young child learns to respond to these life experiences will be determined by how prepared they are for such an experience; and that, in turn, will determine to a large degree how they handle their adulthood, for our quality of life is largely a product of how we manage experience. The more experiences we can create for a child, and the better equipped they are for handling experience, the more we help ensure their well-being for the future.

It has been said—perhaps cynically, but also with some veracity—that experience is what you get after you needed it. Metaphors are one way of providing children with experiences that they may not yet have encountered and of equipping them with skills for such real-life situations when they arise. Therapeutic tales can anticipate challenges or problems a child may yet have to encounter, and model problem-solving skills or potential methods for managing such challenges, thus helping to prepare the child for when the need is present.

Throughout Part Two, you will find a variety of healing stories that are designed not just to deal with a situation when it occurs but also to prepare the listener for a potential occurrence. A child may be helped to prepare for the death of an aging grandparent or much loved pet through stories about managing grief (see Stories 51 and 52) that communicate it is appropriate to grieve, that describe the rituals of burial, and that find strategies for saying good-bye—experiences a child may not have encountered or be prepared for. Other as-yet-to-be-experienced situations may include dealing with an issue of morality (Stories 61 and 62, “Facing a Moral Dilemma”), being confronted by a trauma (Stories 71 and 72, “Overcoming Adversity”), starting at a new school (Story 87, “Facing Changes”), being involved in a motor vehicle accident (Story 88, “Getting Back on Your Feet”), encountering drugs (Story 86, “Finding Solutions,” and Story 90, “Learning to Care for Yourself”), or experienc-

ing suicidal thoughts (Story 89, “Facing Thoughts of Suicide”). The more your stories can anticipate such experiences, the feelings they might engender, and the types of things the child might do to handle them effectively, the more you are giving your child to better manage such experiences when they do come along—and the more you are helping prepare him or her for a future as an effective, functional adult.

## **HOW STORIES FACILITATE PROBLEM-SOLVING**

In planning and writing this book, I have consulted with many colleagues, and a universal theme came through many of those conversations that was most clearly expressed by fellow clinical psychologist Elaine Atkinson, who said, “Children who can work symbolically or metaphorically are the best problem solvers. Those who have difficulty thinking metaphorically also struggle with problem-solving tasks.” Thus, by helping develop a child’s ability to think and work metaphorically, we may facilitate the development of problem-solving skills—one of life’s most essential skills. No one’s life, whether we are born with the proverbial silver spoon in our mouths or not, is without problems. In fact, you may have heard it said that life’s problems can be so complex even teenagers do not have the answers!

In workshop training, Jay Haley has stated that therapy ought to help a person overcome this current set of problems in a way that better equips her or him to overcome the next set. This perspective does not deny the fact that life for children, as well as for adults, has its problems. It does not offer the false promise that when you get over this current situation of bullying, abuse, parental separation, attention problems, or whatever, life will be a bed of roses . . . though that is probably an appropriate metaphor: Life has its beauty *and* its thorns. For a child to be properly equipped for life, this is essential information for him or her to have. Haley’s perspective on therapy makes it clear that this current set of circumstances, no matter how distressing, can be an important learning experience from which a child is capable of developing enhanced skills for problem resolution. If therapy does this, it has served a valuable function, for people who are content know that life has its beauty and its thorns. How you handle it is what matters. . . . And this is where building problem-solving skills is so essential for kids and teens.

Fortunately, we have nature on our side. We are born problem-solvers. From infancy we solve our problems of hunger, soiled diapers, or discomfort by crying and thus gaining parental attention. We grow to become better problem solvers by developing different cries for different problems, thus getting quicker and more specific attention to our needs. We learn to solve the problem of early immobility by discovering how to stand on our own two feet and walk. By the time adolescence comes around we have gone from crying when faced with a problem of hunger to a whole new set of resolution skills: standing in front of the fridge, door open, complaining there is no food in the house until someone comes with something to put in our hands.

Some of the problem-solving skills that kids have learned may be very helpful and adaptive, whereas some may not be so useful. At times kids may encounter problems for which they have not yet developed the appropriate competencies—something that can happen right through our lives, but especially in childhood and adolescence. This is where outcome-focused stories may be helpful. Tales of role models or effective problem-solving heroes like Sherlock Holmes, Harry Potter, a sci-



entist, or an explorer may help provide the listener with the possible means for getting from the problem to the outcome. What would they do in a similar situation to your young client? How do they handle the difficulties your listener is encountering? How can they prepare themselves for similar experiences in the future? What are the things they do that might be useful for you to use?

## HOW STORIES CHANGE AND HEAL

In *101 Healing Stories* (Burns, 2001), I told the case of Jessica, a six-year-old who reminded me of something about the power of stories to change. Because the power of stories to connect with people who may have chosen not to connect in other ways continues to fascinate me, I will repeat Jessica's story in a summarized version, first, because you may not be familiar with it and, second, because (even if you are) I now have a follow-up to the story that was not available when I last wrote about her.

At her tender young age, Jessica was considered different, abnormal. She had been labeled an elective mute: a child who chose to speak only to whom she wished—and, for Jessica, that meant only her immediate family, who considered her vocabulary, sentence structure, and fluency of speech to be comparable to that of her peers. However, her teachers were bound by an educational system that demanded measurement and accountability. There, Jessica was not playing by the rules. She could not be assessed on verbally based measures of academic progress or intellectual functioning.

She had attended a school psychologist and private clinical psychologist who tried to assess and treat her with most of the current, standard approaches. I was told they attempted to measure her IQ, tried to get her to talk through puppets, and set up a behavioral reinforcement schedule for her classroom . . . but because she provided no speech whatsoever at school, there was nothing to reinforce. Jessica remained an elective mute, and as I listened to all that had been tried and failed, I was not sure I had any additional strings to my therapeutic bow.

As I spoke with her mother, Jessica sat on the floor drawing, thus giving me the opportunity to address her indirectly while apparently conversing with her mother. My therapeutic intent was, first, to normalize selectivity of speech, and second, to set an expectation of change, so I talked with Jessica's mother about how we all choose with whom we want to speak and with whom we do not. Some people we like and, thus, communicate with openly and easily, while others we may not want to talk to at all. My aim was to confirm Jessica's power to be selective, and reassure her about the normality of choice.

To set an expectancy of change, I told her mother a true story about a childhood classmate of mine, called Billy. Nobody at school had ever heard him speak, but there was a rumor he spoke at home. Billy was teased by other kids. They poked fun at his silence. But nothing changed . . . until one day.

At this point of the story Jessica stopped her drawing and looked up at me. I continued to keep her mother's gaze and proceeded with the tale.

That day the door of the cupboard at the back of the classroom was ajar and a feather duster protruded through the gap. As we filed into class, Billy's eye fell on the protruding feathers and, without thinking, he exclaimed, "Sir, there's a hen in the cupboard!" Everyone laughed and after that Billy spoke.

Jessica, who had stopped drawing to listen to the story, picked up a fresh sheet of paper and, in a few moments, passed me a drawing of a bird.

“What’s this?” I ventured to ask.

“Tweetie,” came the reply.

“Who’s Tweetie?” I pressed gently.

“My canary,” she answered.

Jessica’s mother looked as incredulous as me. I was the first adult Jessica had spoken to outside of the family in her whole six years. At the next session, she bounced into my office so chatty that my secretary asked, “Can you reverse this process?”

Jessica’s story of resolving her elective mutism did not end there. In some ways that was just the beginning. Though she had extended the range of people with whom she spoke by two (myself and my secretary), she still needed to expand that ability into other situations in her life. While it was great that she would chat garrulously to my secretary and was eager to relate to me the events since our last appointment, she had still not generalized this into the classroom or playground environment, and so I spoke with the school principal, who was very cooperative and keen to assist. She gave Jessica’s teacher permission to come to an appointment. With just the three of us present, Jessica was happy to talk with her teacher. They had been studying the solar system and when the teacher began to ask her questions, Jessica readily and casually listed off the names of the planets—much to her teacher’s surprise.

The challenge then became how to generalize her speech into the classroom, a process I began with successive approximations through further stories, role-play with my teddy bear, and therapeutic exercises. There were many questions I asked her. When she began to speak at school, to whom would she speak first? And after that person, who next? Would she talk softly, loudly, or normally? Would she say just one word or a whole sentence? We agreed on softly to one or two close friends. Each step was reinforced and the next encouraged as she began to extend her abilities to more people and more situations.

Since I first wrote about this case, Jessica’s grandmother, who initiated Jessica’s consultations with me, reported she now speaks with neighbors, has friends visit for sleep-overs (at which her mother has to tell them to stop talking and go to sleep!), and has even stood up in front of the class to give news. Her grandmother’s words were, “Since she has started, she hasn’t stopped.”

Three years after she attended sessions with me, I was surprised to open my mail one day and find a letter from Jessica herself. It read as follows:

Dear George. Remember me Jessica. I saw you when I was six. I hope you are going well. You helped me a lot in talking a bit louder at school. I’ve got a lot more friends now because I’ve been talking louder. I spoke on the Broadcast on the Microphone.

Thank you for helping me.

From Jessica.

A year later I phoned her mother to seek permission to publish Jessica’s letter, and also spoke to Jessica. She was bright, cheerful, and animated in her conversation. According to both Jessica and her mother, she has continued to maintain her progress.

In the case of this six-year-old, I was powerfully reminded how metaphors can hold a unique

ability to facilitate connections where other language forms may not. The empowerment for Jessica to change an established pattern of behavior had come not just through a story, but through one told so indirectly that it was apparently being communicated to someone else.

## WHEN NOT TO SPEAK IN STORIES

I think it also needs to be said that metaphor therapy may not be relevant for every child. Some children, depending on chronological age, mental age, and cognitive development, may be more concrete and less abstract in their thinking. If you can give a child a clear directive and he or she follows it, why bother messing around creating and telling stories (except for the fun of it)? Similarly, I do not want to give the impression that metaphors are the *only* way to do therapy. Though stories have a universal appeal and their effectiveness as a teaching tool has long been demonstrated, there are children (particularly teenagers) who may not appreciate or benefit from such indirect approaches to treatment, perhaps seeing them as evasive, condescending, or irrelevant. There may be parents who do not understand the process and even become angry that they are paying their hard-earned cash for you to “do nothing” but tell stories to their child. It is important to watch carefully for such signs and—in the art of all good therapy—adapt your interventions to the needs and responses of your clients. Often the problem may not be in the *process* of storytelling, which has a universal appeal, but in the relevance of the *content* for that particular child. In general, the more strings you have to your therapeutic bow, the easier it is to make those adaptations, and the more effective your interventions. Metaphor therapy is just one of those strings—and may not be the best or only one necessary to reach the child’s therapeutic goal. Further discussion of the pitfalls in metaphor therapy and pathways that may be followed to enhance therapeutic effectiveness can be found in Chapter 14.

Let me summarize this chapter on the magic of stories with a favorite tale that has its origins back in 1794, when a small boy underwent surgery for the removal of a tumor. Can you imagine what thoughts would have been going through the mind of a nine-year-old child facing the prospect of a surgeon’s knife more than 200 years ago? Of course, he did not know that antibiotics were yet to be discovered or that Louis Pasteur had not yet enlightened the medical world about the need for sterilization. Chemical anesthetics for the control of pain were to remain unknown for another century and a half.

In the absence of anything else to offer the child, he was told a story to help distract his attention from the procedure. So intriguing was the tale that he later avowed he had felt no discomfort whatsoever.

Could a story be that powerful, and could its power linger? For that child, it certainly did. Eighteen years later the very same boy handed one of his own stories to a publisher. What was his story? Snow White. Yes, the boy was Jacob Grimm, who went on to become one of the world’s most famous tellers of fairy stories—stories that continue to be retold in words, in print, in plays, and on movie screens two centuries later.

In this chapter I have attempted to illustrate just *some* of the ways stories can inform, educate, teach values, discipline, build experience, facilitate problem solving, change, and heal. These are just some samples, like a plate of food randomly selected from an extensive smorgasbord, and not meant to be a comprehensive list of the values of stories. Other examples of the power of stories to invoke

emotions, to inspire, or to create mind-body feats are given in Burns (2001). The question to occupy the next chapter is, how do we communicate such healing stories effectively?

### **EXERCISE 1.1**

Reflect on the stories that you heard as a child. Recall which particular stories had a significant impact on your life. How did they

- inform you,
- educate you,
- teach you values,
- provide discipline,
- build experiences for you,
- facilitate problem solving,
- facilitate change, or
- offer some aspect of healing?

Understanding the impact of childhood stories on you will help you understand and appreciate their influence on your young clients.