Therapeutic Storytelling for Dying and Living: The Value of Famous Authors’ Stories

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ABSTRACT: The value of therapeutic storytelling within the context of psychological counseling—in which a counseling practitioner offers the client a story intended to facilitate processing, insight, and/or psychological growth—has been documented. Using a case study, the benefits of this kind of storytelling with a client who had a transpersonal experience is explored, particularly relating to providing education and normalizing and de-stigmatizing these experiences. A case is made for the value of literature, the lives of great writers, and the humanities generally as a source of potentially useful stories for mental health professionals interested in adding storytelling as an adjunct to counseling practice.

KEY WORDS: counseling, psychotherapy, transpersonal experiences, therapeutic storytelling, Dostoevsky

As a hospice social worker, I routinely visit people who have survived life-threatening events related to everything from risky surgeries to sudden cardiac arrest. Some will have had illness-related transpersonal experiences—those transcending the usual personal limits of space, time, and/or identity. Part of my job is to offer a safe place for patients to share and explore these experiences if they choose to do so. In the process, I often find myself offering education about these phenomena, perhaps referring to some of the research on end-of-life transpersonal events. More times than not, I wind up telling a story.
Storytelling was not part of my educational curriculum as a social worker. Nevertheless, the potential benefits of therapeutic storytelling as a complement to supportive counseling and psychotherapy are well established in the professional mental health literature (Burns, 2001; Hammel, 2018; Lankton & Lankton; 1989; Rosen, 1991). As these professionals have asserted and I have found, there’s something about the way stories using simple language and imagery that can engage the imagination, making them ideal for transmitting information. A good story can connect the teller and listener in ways that build trust. When the story is true or contains a useful metaphor, it can shift a patient’s perspective or normalize one’s experiences in profound and meaningful ways.

Naturally, some of the stories I tell come from patients I’ve known—whose identities I am careful to protect. Some come from case studies found in the professional mental health literature or in one of the many personal accounts that have been published. However, as a social worker who started out in the humanities, I have found some of my favorite stories in the literature and lives of well-known authors. Whether it’s a story about Ernest Hemingway’s out-of-body experience during World War I, represented in his novel *A Farewell to Arms* (1929/1995) by a character who felt himself rushing out of his body, or a hyper-real and, as it turned out, clairvoyant dream Mark Twain had about the death of his brother Henry (Powers, 2005), the lives and work of writers abound in useful transpersonal stories.

Shakespeare’s work contains examples of after-death communication, in which a living person perceives the presence of a deceased person or animal. Ambrose Bierce’s (1890/1984) story *An Occurrence at Owl Creek Bridge* can be read as a deathbed synchronicity. Charles Dickens’s (1843/1991) well-known *A Christmas Carol* can be seen as a literary metaphor for a near-death experience in which Scrooge traveled into non-ordinary realms, met helpful beings, experienced a dramatic life review, and faced his own mortality, all resulting in a radical shift in his perspective—toward greater compassion and kindness. The writer Stephen Crane (1871–1900) felt as though he was between worlds as he was dying of tuberculosis. Speaking of his impending death, he told a friend, “When you come to the hedge—that we all must go over—it isn’t bad. You feel sleepy—and—you don’t care. Just a little dreamy curiosity—which world you’re really in—that’s all” (Sorrentino, 2014, p. 367).
The Case of Carla

Recently I visited a patient named Carla who’d had a profound experience of expanded consciousness. She’d been gasping for breath and on the verge of having yet another panic attack when suddenly, as she put it, “I just left my body like a banana coming out of a peel.” She had the sensation of being connected to everything and everyone that had ever existed—a connection grounded in what she intuitively knew to be a state of eternal peace and love. When she returned to her body, weak and confined to a hospital bed, her lungs struggling to breathe because of pulmonary disease, she was struck by the paradox of this peace existing alongside the adversity of her material circumstances.

In the days that followed, the peace remained, and she felt an enhanced sense of empathy and compassion for those around her. As we talked about her experience and what it meant to her, I thought about the 19th century Russian novelist Fyodor Dostoevsky (1821–1881) whose tumultuous life combined a great deal of adversity—sometimes self-inflicted—with moments of transcendent insight, connection, and peace.

In 1849, a young Dostoevsky was arrested by Czarist troops for his participation in a political discussion group known for its free-thinking. After a mock execution he was sent to a prison in Siberia, his experiences there chronicled in his (1862/2016) chilling autobiographical work, *Notes from a Dead House*.

In this harsh, psychologically traumatic environment he found his prison mates to be brutal and depraved. As an intellectual arrested for political crimes, he was viewed with contempt and distrust by the rough-hewn inmates who populated the prison camp.

Inwardly, he returned their contempt. That is until one day when he had a sudden transformative experience. Many years later (1879/2009) in his serialized *A Writer’s Diary*, in a section he called “The Peasant Marey,” he recalled the event that changed his life. It was Easter week on a cold afternoon. Alienated, anguished, and alone, Dostoevsky was suddenly flooded by an intensely vivid memory from childhood about which he had not thought since the day it had happened.

He’d been a frightened child lost in the woods on his father’s estate. He was certain there were wolves roaming nearby ready to tear him apart. Terrified, he came across one of his father’s serfs, a man known only as Marey, who responded with kindness and assurances that the little boy was safe.

It was a simple memory, but in the context of his intense strug-
gles and the memory’s vivid clarity, it was a mystical, consciousness-
expanding experience. Suddenly he felt compassion for his prison
mates. He perceived his deeper connection with them and an inner
goodness beneath their savage veneer. To quote Dostoevsky scholar
Joseph Frank (2010), the young writer had an immediate

sense of perceiving a truth that, if perhaps glimpsed dimly before,

had never been so lucid or so momentous. The memory of the peasant

Marey had this effect on Dostoevsky, who believed he could at last

see through the abhorrent surface of the world to a beauty hitherto

concealed from the eyes of his moral sensibility. (p. 210)

Several times throughout his works, Dostoevsky explored the sud-
den lucidity with which this hidden essence can make itself known,
often during times of illness or crisis. In his (1880/1981) novel, The

Brothers Karamazov, for example, the protagonist Alyosha struggled

with inner tumult and grief after the death of his mentor and sur-
rrogate father. Churning with intense emotions, all of a sudden the

“silence of the earth seemed to merge with the silence of the sky and

the mystery of the earth was one with the mystery of the stars” (Dos-

Awash in expansiveness and peace, Alyosha fell to the earth and

began kissing the ground, his “soul was vibrating from its contact

with ‘different worlds.’ He craved to forgive everyone and everything

and to beg for forgiveness—oh, not just forgiveness for himself, but for


In Dostoevsky’s (1869/1979) novel, The Idiot, the protagonist Mysh-

kin had moments of illumination just before an epileptic seizure—a
disease with which Dostoevsky struggled (Frank, 2010). In a passage
that was transparently autobiographical, Dostoevsky (1869/1979) told
the reader that Myshkin’s

sensation of being alive and his awareness increased tenfold at those
moments which flashed by like lightning. All his agitation, all his
doubts and worries, seemed composed in a twinkling, culminating in
a great calm, full of serene and harmonious joy and hope, full of un-
derstanding and the knowledge of the final cause. (p. 258)

Today, neurologists call this state an “ecstatic epileptic seizure.” In
a modern description by Gschwind and Picard (2016), they explained:

During the first seconds of these seizures, ecstatic auras provoke
feelings of well-being, intense serenity, bliss, and “enhanced self-
awareness.” They are associated with the impression of time dilation,
and can be described as a mystic experience by some patients. The functional neuroanatomy of ecstatic seizures is still debated. However, for Dostoevsky the debate of functional neuroanatomists would have been immaterial. For him these were moments of expanded consciousness the memory of which he carried into his life and which he infused into the lives of more than one of his characters.

More than any writer I know, Dostoevsky blended the imagery of life’s rough edges and the psyche’s inner demons with glimpses into the transcendent and transpersonal. As Carla spoke about her experience, I decided to tell her about Myshkin.

There were parallels between Myshkin’s experiences and Carla’s: the struggle with physical illness and its inextricability with the transcendent experience, the contrast between the mystical and the terrifying, and the similar qualities of the character’s and the patient’s experiences generally. Perhaps these parallels might enable Carla to identify with Myshkin. This kind of identification can help a patient to feel empathy and to explore an event from a safe distance, project qualities and questions onto the story, and have one’s own experience normalized, even de-stigmatized.

When I told her about Myshkin, the story rang a bell. “That’s it!” she said. “That’s what happened to me.” She had questions about the author whose name she had never heard. The fact that Dostoevsky lived so long ago in a place so distant and mysterious seemed to underscore the way such experiences can bind disparate people into the larger human—or cosmic—family.

For clients like Carla who have had transpersonal experiences, another benefit of storytelling is that it enables them to see and assimilate these experiences from a comfortable psychological distance, at a safe pace, in a context of emotional safety and therapeutic support. For Carla, the story enabled her to identify with certain aspects of Myshkin’s and Dostoevsky’s lives and to project onto them important questions and personal concerns. Thus, as she asked questions about Dostoevsky’s life, she seemed to be asking them about her own. Did the experience change him? Did it scare him? Make him wonder if he was crazy? Did people believe him? Did he, as she put it, live up to the wisdom he’d been given, or did he fall back into old patterns?

Discussing the last question, which seemed particularly important to her, we were able to bring in humor and compassion for Dostoevsky’s all too imperfect humanness. These experiences didn’t heal his inner wounds or dissolve his ego, but they did provide him important refer-
ence points by which to navigate the trials of his life and a wider perspective for gleaning what was important and true.

In Carla’s case, the story about Myshkin and the author who brought him to life went beyond education about these phenomena. The parallels with her experience engaged her curiosity in ways that brought insight, comfort, and a confidence that the spiritually transformative meaning she had given this experience was valid however imperfectly she might express these new insights amidst the challenges of illness and death.

**Conclusion**

According to well-known psychotherapist Irvin Yalom (1980), Thornton Wilder once commented on the way great authors can reveal the inner workings of the human psyche. He observed that “if Queen Elizabeth or Frederick the Great or Ernest Hemingway were to read their biographies, they would exclaim, ‘Ah—my secret is safe!’ But if [novelist Leo Tolstoy’s character] Natasha Rostov were to read *War and Peace* she would cry out, as she covered her face with her hands, ‘How did he know? How did he know?’” (Yalom, 1980, p. 21, bracketed material added).

I have found that writers like Dostoevsky enable readers to understand complex characters from the inside, generating empathy, compassion, and understanding in ways that standard clinical observation often does not. Thus, literature is not only a trove of potentially useful therapeutic stories; it is also a vehicle for deepening health professionals’ empathy and capacity to understand the meaning of a client’s behaviors, struggles, and experiences. In the case of clients who’ve had transpersonal experiences that appear to be at odds with conventional norms, this ability to place ourselves in their shoes and understand the meaning and impact of these events from their perspectives is critical to our capacity to recognize and enhance their holistic wellbeing. More broadly, a background in the humanities generally can enhance mental health and medical professionals’ perspective in ways that bring insight, awareness, and creativity to their work with patients and clients.

Psychiatrist Jonathan Shay (1995; 2002), for example, has shown how a study of Homer’s *Iliad* and *Odyssey* can deepen health professionals’ sensitivity when working with survivors of combat trauma—many of whom may have had combat-related near-death or other transpersonal experiences (Goza, Holden, & Kinsey, 2014; Sullivan, 1984).
Rollo May (1958) reminded health professionals that when trying to understand human psychology and models of healing we would do well to study “Socrates in his dialogues, Augustine in his depth psychological analysis of the self, Pascal in his struggle to find a place for ‘the heart’s reasons which reason knows not of’” (p. 11). Neurologists Lewis, Amini, and Lannon (2001) acknowledged that when it comes to exploring the mystery of human emotion, it is not just to scientists and psychologists that health professionals must look but also to great literature and the arts, because the “aspiration to distill and transmit the secrets of the heart can attain a moment of matchless lucidity within a novel, a play, a short story, a poem” (p. 14).

The good news is that mental or medical health professionals need not earn a degree in literature or history or comparative religion to bring the power of the humanities into their clinical work. They may do so simply by cultivating interests and curiosity in whatever area draws them and being attentive for good stories, telling metaphors, or narrative parallels that may speak to their clients’ experiences. When it comes to expanding the ability to respond effectively to clients who have had transpersonal experiences, becoming familiar with great writers like Dostoevsky can be a good place to start.

References


