

FAIRYTALE THERAPY



Telling stories to children involving 'travelling with one's mind' is an ancient tradition which, as well as representing one of mankind's fascinating leisure activities, can be a good instrument for teaching, and it can even be a type of therapy aimed at solving behavioural and emotional problems.

Stories and tales of fantasy, used according to the operational methods of 'fairytale therapy', can help a person's imagination and comprehension of everyday life to develop, as well as sustain the development of some important personality aspects. In addition, they help people to be in control of new emotional states which, in some moments in life, can create fear, closure, regression, tension and bad feelings inside of them and even cause inappropriate behaviour, which is a way to cover up attempts to deal with the most difficult of experiences. The content of fairytales and fables is not just a world reserved for children though, rather it acts as a symbolic universe to which there is always an open door leading to a place where there are no age limits on entrance and where numerous stimuli and benefits for a person's well-being and personal, internal growth can be found.

The therapeutic power of fairytale therapy

Fairytale therapy is a specific type of [bibliotherapy](#) made up of a system of instruments and procedures which aim at promoting growth and improving health. It embraces narrative methods and reading passages based on fantasy and involves a narrator and humans, animals, objects of even plants which come to life. Fairytale therapy uses the symbolic language of traditional stories aimed at children and encourages listening and reflection about the narration, as well as individual or group reconstruction of the plot, with the aim being to encourage a deep and correct assimilation of what has been read or generate personalisation, depending on the specific needs of the participants and context. Narrating made-up stories, which can include fairytales, fables, myths, legends and other folklore stories, which lend themselves very well to addressing a subject, are very valuable from a pedagogic and psychological point of view.

One of the main advantages of this method is the opportunity to **understand or change aspects concerning the concept of time**, thus gradually transforming the concept of time. Fairytale therapy actually allows the patient, who can be any age, to move him/herself along a time line, making numerous things possible.

Through these 'mental steps', a *window to the past* can be opened, allowing patients to focus on problems and solutions which are very different to current ones, thus creating an instrument for confronting the present and understanding differences between certain habits and modern lifestyles. This comparison is very important since, through awareness and comprehension of methods and timeframes related to past problems, patients learn how to develop patience and deferment, cognitive-emotional skills which are difficult to perfect in real social situations because of the speed of communication and transactions between people.

Fairytale therapy also allows patients to *mirror the present time* through tales which are very close to someone's or a group's current reality, and this shows people that some personal problems are also universal problems, relieving the sense of solitude which is felt when going through difficult problems. It also provides different perspectives on the problem, possible thoughts and various, more useful reactions to help find a solution.

The stories told help patients look into the future, with regards to certain behaviour, and learn or predict how things will end if they act in one way or another.

More generally, fairytale therapy provides some **educational and psychological stimuli** which can be used, if necessary, for preventative and rehabilitative purposes. These come from the possibility to encourage:

- imagination and fantasy;
- expression of human problems and reflection on thoughts and emotions;
- development of moral values;
- acquisition of communication and interactional skills;
- acquisition of fundamental emotional skills, such as recognition and management of interior states in relation to context and events.

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From a strictly therapeutic point of view, and for the support of behavioural and psychological problems, fairytale therapy is a powerful resource for:

- allowing people to talk in an impersonal or gradual way about personal problems, thus slowly letting defences drop;
- allowing people to better recognise and express repressed and unexpressed emotions they have felt;
- providing alternative thoughts, emotions and behaviour in uncomfortable or maladjusted situations.

In more general terms, fairytale therapy allows patients to **use their imagination in a positive way**, transforming distortions of reality into instruments which are able to generate new experiences, mental images and behaviour and create positive and more appropriate alternatives in relation to reality.

From narration to fairy tales

The therapeutic potential a fairytale, or other similar types of fantasy stories, contains is structured in **three phases**.

Phase 1) There is an initial warm-up moment in which a subject or problem is presented which aims at captivating the patient's interest, thus stimulating him/her throughout the plot, which can be similar to the patient's current life. By doing this, it is possible for the patient to enter into the story through a natural processes of identification, yet this is done from a distance which allows the patient to experience the situation with a certain emotional control over the events that are told. During this phase, it is not necessary, nor it is recommended, that the real story and the imagined story to be addressed overlap completely, although there can be similarities in the incidents and problems experienced.

Phase 2) During the second stage, the patient is fully immersed in the emotional phase, that is, when the narrative reaches the point during which it is possible to fully work on the patient's internal state, freeing any emotions which he/she may have been afraid of releasing and providing him/her with an understanding of these 'nameless emotions', which can now be recognised through the characters in the story.

Phase 3) Lastly, in the third and final stage (the 'ultimate' phase) therapeutic fairytales reach the end of the story, making the patient think about solutions to daily problems, and the fairytales become real problem solving exercises which, in order to be completely effective, have to lead on to an emotional and deep solution to the problems, as well as create an opening to review one's thoughts and behaviour.

Of course, as is the case with all changes, opening oneself up to a new prospect on life requires a certain amount of time to allow for a true change, which comes from a new, internal equilibrium involving thoughts, emotions and behaviour. For this reason, fairytale therapy often requires more than one session in order to consolidate results through a gradual and deep change, which allows the patient to get rid of contrasts and conflicts created by newly arisen elements.

The **three main methods of fairytale therapy**, which can be used separately or can be combined, are:

- reading fairytales, which have an educational-therapeutic construction;
- interactive fairytale therapy;
- therapeutic fairytale narration acted out by the patients, in a guided way, so as to get to the point where they positively solve a problem.

Generally, when patients are reading a fairytale, no matter how good or bad it is, they should never be left alone to spontaneously interpret it, rather they should be guided by means of questions and dialogues aimed at providing full understanding of the events and experiences the characters go through. This phase of guided thought and reflection is aimed at fulfilling objectives of change proposed by the patients themselves and it can sometimes be done in a simple way through proposed exercises related to appropriate texts.

Guided creation of a fairytale or fable is preferred when there is no appropriate fairytale available for the subject, when the ending is not appropriate to the real-life situation or the patient's personality, as well as when the therapist wishes to provide a natural expression for the content of the patients' inner worlds, for the purpose of a diagnosis or even emotional abreaction.

The **materials used** in fairytale therapy are chosen according to the type of activity that will be carried out. More precisely, the following items can be used:

- traditional fable, fairytale and other children's story books;
- books accompanied by scenic elements;
- fairytale audio-books;
- cartoons;
- animated films;
- puppets to use in stories.

It is thought that fairytales involving animals or non-human characters are most effective since they allow patients to subconsciously identify with the characters, thus reducing the possibility of any possible resistance caused by the desire to not confront the problem in question.

How to grow up and heal in the world of fairytales

Fairytale therapy is **symbolic** and through it, it is possible to embrace educational, emblematic and therapeutic stories. For educational and emblematic stories, concepts and experiences, which may be useful in a general way for the evolutionary stage of the recipients, are introduced. Through these stories, it is possible to help develop certain mental concepts, and real-life models can be created which are useful for dealing with new, everyday situations in a better way. When therapeutic metaphors are embraced, new solutions to internal concrete problems or conflicts can be found.

In the case of **educational objectives**, it can be the patient's *parents* or other *educational figures* who narrate or guide the fairytales. What remains constantly important, however, is the need to *establish a relationship in which stories are told*: without a foundation of trust and communication, it is not possible to expect a person to open up to listening, nor constructing a fairytale and expressing him/herself. It is important to create an environment which is open to questions and considerations, but also an atmosphere of emotional closeness so people do not feel alone during the narration.

For this reason, it is recommended that both verbal and non-verbal language are taken care of so as to avoid barriers forming between the narrator and listeners, and the narrator and listeners should be seated in a way that makes everyone feel they are sharing something together.

If the therapist/patient wishes to use a story related to current problems, it is important to first establish a habit of sharing the narration and then, after a few sessions concerning other subjects, introduce the key subject.

It is also possible to turn the moment of reading a fairytale into a relaxing ritual which promotes learning of what is read, and listeners can be encouraged to close their eyes to visualise what is being said.

A fundamental rule is to respect attention spans, therefore in some cases it is necessary to divide the narration up into sections, taking a break every now and then before going on with the reading.

In order to fulfil **more complex objectives regarding change and help**, the narration needs to be left to experts who are specialised in the field of the problem in question, who are able to deal with any unexpected emotions and who can personalise, if necessary, parts of the story or reflection exercises.