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Beyond the Archive: Narrative as an Elaborative Rehearsal for Autobiographical Memories

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Abstract

The present work aims to reflect on the relationship among autobiographical memory, narrative, and the relational context in which life events are narrated and received, with the aim of examining the elaborative and transformative properties of the latter. Through a review of theoretical models and empirical evidence concerning the relationship between memory and narrative, the author reflects on the elaboration of the personal past by moving beyond the view of memory as a mere archive of contents and instead proposing a plastic and continuously evolving conception of the autobiographical repertoire of memories.

Keywords: autobiographical memory, narrative, relational context

1.

The aim of this communication is to share my thoughts by bringing together some scientific evidence and results from my research on autobiographical memory, which I hope will be useful for reflecting on the fascinating but difficult relationship between memory, narrative, and identity.

Autobiographical memory is defined as a type of episodic as well as semantic memory for specific life events related to the self in relation to others (Pillemer 1998; Conway & Pleydell-Pearce 2000; Conway 2005). I particularly appreciate this definition included in Conway's model of the Self-Memory System (SMS, Conway & Pleydell-Pearce 2000), which considers the role of identity and culture in autobiographical remembering: a person's identity and life goals drive the remembering of one's personal life history. In this sense, both culture and the individual shape autobiographical memory, contributing to the definition of the Self. In this process of identity definition, the role of the past is important, but even more pivotal is the elaboration a person makes of their own past.

There is actually just one way to study autobiographical memory, and it is by means of the narrative people provide of it. As Bruner (1986; 1990; 1991), McAdams (2001), and other scholars have suggested, narrative is the natural human tool to reflect on and share the personal past with others, or with ourselves. Moreover, it is by means of narrative, and particularly through 'cooperative discussion' with parents, that children internalize the structure of shared conversations, using it to guide their own recollection of significant past experiences (Nelson & Fivush 2004). In fact, different interactive and communicative modalities (for instance, with the caregiver) imply differences in the content of children's narratives and, hence, different ways of encoding and retrieving autobiographical memories (Nelson & Fivush 2004; Sales, Fivush, & Peterson 2003).

What I want to point out is that narrative is not just a way to recall and share autobiographical memories, but it can be considered an elaborative rehearsal (Tulving & Craik 2002).

Narrative provides new semantic, pragmatic, and communicative features for memory through what Bruner called the "narrativization" process (Bruner 1990). People need to re-elaborate their past

memories through narrative in order to find new meanings and new emotional involvement, especially in the case of impactful experiences such as oncological illness. Bruner himself, in 2004, published an article entitled Life as Narrative, considering the role of narrative not just in sharing past life memories with others, but also in shaping present life. In other words, the use of language, the narrative format, and the setting not only rehearse the memory but also produce a story radically transformed from what it was before (Smorti 2011).

These transformations, which may be beneficial to the mental well-being of the patient, have been demonstrated in numerous studies (Pennebaker et al. 1988; 1990; 1997; 2001), and occur because the personal story is shared and reconstructed with an interlocutor through narrative, moving from an internal to an externalized language enriched by narrative structure (Bruner 1990). Pennebaker and colleagues, for instance, dedicated many years to the study of emotional disclosure of past negative events through narrative and found that both oral and written narratives improve the elaboration of traumatic experiences. In this process, narrative gives some of its characteristics to memory, such as a greater use of language, a temporal and causal organization, the emergence of emotions and intentionality, as well as a re-elaboration of the emotional processes related to the past event.

Psychotherapy itself is focused on the benefits of narrating negative and traumatic experiences, assuming that narrating past experiences to the therapist can improve a patient's ability to give meaning to their past.

In the last 10 years, I have investigated the relationship between narrative and autobiographical memory by exploring changes in the emotional valence of memories when they are narrated. When people narrate their memories, they have to organize them within a narrative perspective. Thus, it is difficult to separate the influence of thinking

about or reminiscing memories in a narrative perspective from the act of narrating, that is, putting one's thoughts and memories into words.

In line with my research interests, I investigated the narrativization process in people experiencing biographical disruption due to a serious disease such as cancer (Fioretti & Smorti 2017).

Facing a breakdown of autobiography implies the need to re-elaborate life experience, thereby re-establishing continuity between life before and after the disease (Fioretti 2025). Scientific evidence shows that cancer affects the ability to recall past events and to reflect on them. In these cases, autobiographical memory fluency is often characterized by a tendency to recall general rather than specific memories, and positive rather than negative ones.

We investigated the emotional changes in memory due to the narrativization process by implementing a ME-NA-ME model (Fioretti & Smorti 2015; Smorti & Fioretti 2016).

We met oncological patients while they were attending chemotherapy in the Day Hospital service of the oncology ward in Florence. Patients were encouraged to recall memories of their illness experience and to select the emotions connected to the recalled event from an eleven-item list: they could select one or more emotions, including those of different emotional valence (positive and negative), appropriate to describe the recalled event. They were then asked to narrate in detail the selected memory, with no time limits. Once this task ended, they had to classify their narrative in terms of emotions. They were asked to reflect on the narrative and to select, from the same list, the emotions connected to what they had narrated. To evaluate emotional changes, we counted the number of emotions used by participants to label their memory and their narrative. Moreover, we considered the emotional tone, which could be positive, negative, or complex, when both positive and negative emotions were used together to label a memory or a narrative.

Our results showed that narrating to others promotes emotional changes in autobiographical memories. In our study, narrated memories were richer in emotional terms than memories yet to be narrated. Moreover, narrated memories were significantly more complex than those yet to be narrated: the narrativization process allowed new and different emotions to emerge.

Interestingly, surprise was the emotion that increased most significantly. Surprise expresses the presence of an unexpected event, and this is one of the particularities of narrative—taking into consideration and giving meaning to what is unexpected (Bruner 1991). Thus, it seems that through narration, memories are indeed transformed into a narrative form and acquire narrative features.

Furthermore, we observed that the narrativization process is stronger in negative memories of illness. This result was confirmed by analyzing the linguistic differences between negative and positive illness narratives: negative narratives are longer, more related to the past and the future, and significantly more organized through a greater number of total and temporal connections, probably reflecting participants' need to create coherence from negative memories.

Our research team went a step further and investigated the role of interlocutors in the narration of autobiographical memories. Since memories are narrated in a relational context, many authors suggest that the characteristics of the listener play a crucial role in the narrativization process (Pasupathi 2001; Pasupathi et al. 1998; Pasupathi & Oldroyd 2015). In this sense, we can hypothesize a RE-NA-ME model, in which the narrator–listener relationship influences the narrative. The narrative, in turn, influences autobiographical memory by producing new meaning and elaborating it through language.

To assess the RE-NA-ME model and the emotional elaboration of memory through narrative in a relational context, we asked 150 emerging adults to recall an autobiographical memory of the end of a

close relationship and to identify the emotions related to the remembered event (Fioretti, Pascuzzi & Smorti 2017; Pascuzzi, Fioretti & Smorti 2017). Then, we asked them to narrate their memory to a listener who had been previously trained to be either empathic and attentive or detached and distracted. Participants were divided into two groups: the attentive listening (AL) group, in which a female peer listened attentively and responded empathetically, and the detached listening (DL) group, in which the peer was trained to be detached and distracted during listening. After the narrative task, participants again assigned emotions to their memory. In a follow-up after 15 days, they were asked once more to recall the memory and identify the emotions related to the experience.

As in the previous studies, we counted the number of emotions and the emotional tones of the memories at initial recall and at follow-up. The narrative format was confirmed to play an important role in the elaboration of autobiographical memory, but only when it occurred within a welcoming and empathic interaction. In particular, the data show that narrating a past memory to an attentive peer improves its positive elaboration while simultaneously decreasing the number of negative emotions. This change does not occur when the narrative setting is characterized by detached and distracted listening.

Interestingly, our results show that the effect of narrativization on the emotional valence of memory is maintained after 15 days. Narrative is, in effect, an elaborative rehearsal of memory (Tulving & Craik 2002).

2.

Looking at our results, it seems clear that sharing autobiographical memories is not just a way to recall them, but a truly dynamic process of elaboration. In this sense, memory cannot be considered an archive in which people encode, store, and retrieve past life episodes

(Brockmeier 2015). This concept may seem outdated to many scholars, but this is not entirely the case. Consider, for example, the "memory file" in Pavilion Zero at the Expo in Milan about ten years ago, where memory was represented as a large archive full of drawers in which information had been carefully stored. On the contrary, memory is a dynamic process that promotes the continuous elaboration and construction of remembering. The Self and the cultural context—the life space, as we might say—play a pivotal role in this mechanism, as we have seen in the case of my studies on the narrativization process. Recent studies in neuroscience underline that, from a neurocognitive and neurobiological point of view, there is no clear difference between the brain processes involved in remembering and perceiving (Brockmeier 2015). For instance, Addis and colleagues (2007) examined the neural regions mediating the construction and elaboration of past and future events. Through fMRI analysis, they discovered that recalling a past event and imagining a future event involve the same neural substrates (Addis et al. 2007; Schacter et al. 2008). In other words, there is a similarity among the cognitive processes of remembering the past, perceiving the present, and imagining the future. This is exactly what happens when we narrate an autobiographical memory: narrative gives memory a temporal and causal structure, connecting what happened in the past with the present and the future.

In line with my clinical practice as a psychoanalytic psychotherapist, many mental processes, such as dreams, can be understood as attempts to shape and give voice to what is otherwise inexpressible in our past. The main goal of psychotherapy is not the discovery of historical truth, but the co-construction of a narrative truth, starting from the elaboration that the patient, together with the therapist, makes of past life experiences (McLeod 1997; McWilliams 2017). The therapeutic act is, in fact, an attempt to reconstruct the

traumatic past by giving new form and interpretation to objects of love and their meaning in the patient's life. In the psychotherapy setting, the past is known through the narrative a patient produces in the present.

The therapist, as an affective container for the patient's narrative, receives and facilitates the elaboration of traumatic memory, promoting a symbolic reconstruction of lived experience and the attribution of meaning. In this perspective, repetition of experience does not merely constitute simple rehearsal, but rather a process of working-through, as argued by Freud in his essay Remembering, Repeating and Working-Through (1914).

This containing function and support for symbolic processes are continuous with the broader development of narrative competencies and the capacity to retrieve and elaborate autobiographical memories. Authors such as Bruner and others have suggested that these abilities originate in early interactions of co-construction of autobiographical meanings between parent and child (Ninio & Bruner 1978; Haden, Haine & Fivush 1997), contributing to shaping the past through present experience.

This is not a new idea: in 397, Augustine of Hippo wrote in his Confessions: "One fact is clear: neither the future nor the past exist. It is inexact to say that there are three times: past, present, and future. Perhaps it would be more exact to say that time can be conceived in three ways: the present of the past, the present of the present, and the present of the future. The present of the past is memory, the present of the present is direct experience, and the present of the future is expectation." The concept of life space also points in this direction: the total field of possibilities in one's identity is constituted by the present, informed by our capacity to engage with the past and to imagine realizable futures.

Nevertheless, we must take into account that memory is a kind of virtual journey into the past, but the way we study it is through narrative in the present. In this sense, narrative is an elaborative rehearsal of memory.

Studies on the narrativization of memory and on the role of the listener in memory elaboration suggest that memory should be considered a dynamic process operating within, and shaped by, context.

Studying memory means recognizing that sharing memory with others is a process that changes both memory itself and the Self.

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