Narratives are grounded in everyday life, from our conversations to films to books. We all create and tell stories, and we listen to other people’s stories. Using narrative approaches is both meaningful to people and clinically effective. This book provides a broad-ranging introduction to narrative psychology and applies narrative to professional contexts to help people develop efficient techniques to use in practical situations, including clinical and occupational psychology. It offers a rationale for the use of narrative approaches, translating core research into accessible techniques, and illustrates these approaches with practical examples across a range of areas. In turn, it details how practitioners can help people change or develop their narratives to enable them to live their lives more effectively.

**Nigel Hunt** is a health psychologist and associate professor at the University of Nottingham, UK. His research focuses on narrative psychology and traumatic stress. Alongside his collaborators, he has tested and applied narrative techniques in many countries. He has written nine books, including *Memory, War and Trauma* (2010), *Guided Narrative Techniques* (2012) and *Landscapes of Trauma* (2019).
APPLIED NARRATIVE PSYCHOLOGY

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Preface

Since drafting this book, I have experienced a diagnosis of terminal bowel cancer for which, at the time of writing, I am undergoing treatment to try to control. It is an experience that has enabled me to put narrative into practice. Cancer is a difficult illness to deal with, and we all respond in different – yet similar – ways. One of my main responses has been to start a blog, a narrative account of my experiences. The blog is about my thoughts, feelings and behaviour in relation to what I am going through regarding my cancer. It is (I hope) explicit, honest and detailed. It covers everything from the experience of a sigmoidoscopy to my reflections on being an atheist and my lack of fear of death. I am terrified of pain but death is non-existence, so it would be absurd to be frightened of being dead. It is not how everyone would respond to a cancer diagnosis, but it is the way I am responding, and as a narrative approach, I find it very successful. What follows will, I hope, show you how other people may draw on narrative approaches to help them not only with health-related problems but also with other problems associated with human experience, such as work.

The book is structured to provide an account of what narrative is and various ways of doing it. These methods can be adapted to different circumstances, but they are all practical ways of applying the ideas of narrative to psychology-related problems. This is not a book preaching particular methods or philosophies. In the end, these do not matter to the applied psychologist: what matters is what works. Nevertheless, where possible, I have presented the evidence relating to the various methods. The problem is that several of these methods have a limited evidence base, which does not mean they have no value, but does mean that we need to be careful in how we interpret and use them, and that we should, as psychologists, be trying to build up the evidence base. Narrative is central to what we do as humans, so it should be central to psychology.

I would like to thank all my colleagues and students who have worked with me on narrative-related topics over the last couple of decades. I would
also like to thank the staff at Cambridge University Press for turning a rough manuscript into a book. Personally, I would like to thank my wife, Sue, and all my family and friends for being so supportive in this difficult time, and finally the wonderful staff at the Royal Derby Hospital, who have helped me stay alive long enough to get the manuscript finished. The staff at the hospital, my GP practice and in the community are amazing, highly dedicated people who have to put up with a lot from so many ill and frightened people. I would like to dedicate this book to them.