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Reliability and validity of the re-telling about life experiences scale

Kazuhiro IKEDA (池田和浩) [1], Taku SATO (佐藤拓) [2], Yayoi KAWASAKI (川崎弥生) [3] and Kazuki NISHIURA (西浦和樹) [4]

This study aimed to develop the Re-telling About Life Experiences (Re-TALE) scale and test its reliability and validity. A total of 616 participants (mean age = 19.33 years, *SD* = 1.10, 208 males and 408 females) participated in the three studies conducted. In Study 1, exploratory and confirmatory factor analyses revealed sufficient internal consistency for a three-factor structure of the Re-TALE scale. Study 2 confirmed the retest reliability. Furthermore, significant correlations were found between the Re-TALE and Thinking About Life Experiences scales in Study 1 and between the Re-TALE scale and Satisfaction With Life Scale, Prospective and Retrospective Memory Questionnaire, and General Metamemory Scale in Study 3. These findings confirm the convergent validity of the Re-TALE scale and its usefulness in assessing retelling function.

Key words: Re-TALE, retelling, memory, functions

Introduction

Emotional events have significant implications for people (Ritchie et al., 2016). As a result, individuals often share their personal emotional experiences with others (Rimé et al., 1992; Tversky & Marsh, 2000), and these memories contribute to the formation of identity through recollection and dialogue, influenced by personal and cultural factors (McLean, 2005; Wang, 2011; Wilson & Ross, 2003). Emotional experiences contribute to the construction of the self through repeated social sharing.

Narrating one's personal memories to others with care and empathy promotes the co-construction of the emotional meaning of the narrative (Fioretti et al., 2017). The characteristics and social context of an audience can result in memory recall bias (Marsh, 2007). Collective recollection suppresses negative emotions and enhances positive emotions more than individual recollection (Maswood et al., 2019). Therefore, recounting personal experiences strongly facilitates emotional reappraisal (Fioretti & Smorti, 2017), which is an interactive and dynamic cognitive process between the narrator and the listener.

Retelling memories refers to the act of repeatedly recounting past experiences (Ikeda & Nihei, 2009). Ikeda (2015) investigated the purposes for which narrators retold their emotional autobiographical memories. Metrical linguistic analysis revealed the purposes of retelling. The

1 Department of Psychology, Shokei Gakuin University, 4-10-1 Yurigaoka, Natori, Miyagi 981-1295. (Email k_ikeda@shokei.ac.jp)
2 Department of Psychology, Meisei University
3 Faculty of Human Sciences, Waseda University
4 Department of Developmental and Clinical Studies, Miyagi Gakuin Women's University

results showed that repetitive and socially shared emotional memories are recounted for three different purposes. First, negative emotion regulation (NER) implies that when a negative memory is retold with negative emotions, social sharing generates empathy in the listener (El Haj et al., 2022) and emotional conformity between the listener and narrator (Pudlinski, 2005). Second, positive emotion expansion (PEE) implies that sharing memories of positive experiences increases the narrators' positive emotional intensity (Hovasapian & Levine, 2018) and promotes their resilient thinking (Arewasikporn et al., 2019). Third, cognitive change (CgC) means that recounting a stressful experience from a broader perspective increases the sense of closure with the memory (Lee et al., 2020) and positively alters its central elements (Ikeda & Nihei, 2009). Social sharing of negative memories using the CgC function promotes self-modifying memories, starting with the emotional component. The functional features of retelling are reflected in these three purposes.

Autobiographical memory is closely related to the function of retelling (Bluck, 2003) regarding reflection and sociality. According to the functional approach of the theory of memory (Bluck et al., 2019), autobiographical memory, which is closely related to identity (Conway & Pleydell-Pearce, 2000), has three functions: self, directive, and social (Bluck, 2003). The self function involves using autobiographical memory to maintain self-continuity and engage in self-evaluation. The directive function involves using autobiographical memory to predict and plan one's future. The social function involves using autobiographical memory to build and maintain relationships, empathy, and provide guidance to others.

All retelling functions require social sharing. Therefore, retelling functions could involve the social function of autobiographical memory. The NER and PEE functions have a further other-oriented role than the CgC function (Ikeda, 2015), and show a stronger association with the social function. In contrast, the CgC function is dedicated to more self-oriented roles (Ikeda, 2015) and shows a stronger link between self and directive functions. Development of a scale to measure retelling functions, and assessment of its reliability and validity are required to investigate these claims.

Social interactions enhance subjective well-being (Hall et al., 2023; Milek et al., 2018; Sun et al., 2020). Compared with other-oriented conversations, conversations with self-oriented purposes promote deliberative thinking of one's personal identity (Ikeda, 2015). Hence, CgC function is more likely to enhance subjective well-being than other strategies. In addition, CgC involves cognitive processing with suppressive control of emotions (Ikeda, 2015) and could be involved in metacognitive traits. Subjective well-being is associated with metacognitive ability (Csábi et al., 2023; Fastame et al., 2013). Thus, a relationship between CgC and metacognition could be inferred. To analyze the properties of the retelling function in detail, examining its relationship with these cognitive properties is necessary.

Humans are social beings who actively share information about emotional events with others (Dunbar, 2004; Rimé et al., 1992). The development of a psychological instrument that briefly measures the retelling function of emotional autobiographical memory would provide a new measure of the cognitive functioning of humans as social beings, and could

also be a useful predictor of mental health status. In this study, we created a scale measuring three functions of retelling and tested its reliability and validity. First, a retelling function scale was created to confirm the fit of the model and verify its relationship with the autobiographical memory function. Second, the retest reliability of the retelling function scale was confirmed. In addition, we examined the relationship among retelling functions, metacognitive characteristics, and subjective well-being. For testing convergent validity, this study hypothesized the following.

Hypothesis 1: Higher NER and PEE are associated with higher social autobiographical memory functions than CgC. However, more frequent use of CgC is associated with more frequent use of self and directive functions of autobiographical memory.

Hypothesis 2: Higher use of CgC is associated with higher subjective well-being and metacognition compared to other functions.

Study 1

In Study 1, we created new items for the Re-telling About Life Experiences (Re-TALE) scale based on the three retelling function classifications (Ikeda, 2015). We also measured autobiographical memory function (Bluck & Alea, 2011) to assess the scale's convergent validity.

Methods

Participants. A survey was conducted with 215 undergraduate students (mean age = 19.69 years, *SD* = 1.08, 65 males and 150 females). The participants answered the questions if they agreed with the study's aims. During the time these surveys were conducted, the criteria to obtain approval from the university's institutional review board were unclear. Hence, we were unable to obtain ethical approval. All study participants provided informed consent. The participants were informed that individual data from the study would be statistically processed, that their personal information would not be identified, and that it would not be used for other purposes. They were also informed that they were free to stop answering the questionnaire at any time and that there would be no harm to them if they stopped answering.

Retelling Function Scale. The Re-TALE was developed based on Ikeda (2015). The Re-TALE consists of an introductory question and items that ask about the purpose of the retelling. This questionnaire format that separates the introduction and purpose items is also used in the Thinking About Life Experiences (TALE) scale (Bluck & Alea, 2011). Therefore, the items of The Re-TALE were developed based on the findings of Ikeda (2015), with reference to The TALE for the question format. The participants responded on a 5-point scale (1 = rarely to 5 = very often). For the NER items, they rated the frequency with which they told others about the negative experiences that had occurred in a negative manner. The participants responded to nine items ("I tell a negative memory to get others' sympathy for my situation" or "I tell a negative memory to get others' empathy for my harsh experience").

Similarly, for the PEE function, the participants rated 11 items relating to how often they told others about the positive experiences in a positive manner ("I tell a positive memory to share my positive feeling with others" or "I tell a positive memory to enjoy it together with others"). For CgC function, they rated eight items relating to the frequency with which they told others of painful experiences in a positive manner ("I tell a negative memory as a positive one to put failure into words and view it in a positive manner" or "I describe a negative memory in a positive manner to think positively about my failure without worrying"). This scale was developed in Japanese. The reliability and validity of the English version have not been verified. Items in English were omitted to prevent misuse.

Thinking About Life Experiences (TALE) Scale. The Japanese version of the TALE scale (Ochiai & Oguchi, 2013) was used to measure the three functions of autobiographical memory. The participants rated eight items on a 5-point scale (1 = rarely to 5 = very often).

Results and Discussion

Exploratory Factor Analysis of the Re-TALE Scale. R version 4.2.3 was used for analysis (R Core Team, 2023). The retelling frequency question was excluded, as it was an introductory question. In addition, two items (NER07 and CgC03) were also excluded owing to the floor effect. We found that three-factor models solved for the scree plot, parallel analysis, and minimum average partial correlation were optimal.

An exploratory factor analysis was conducted via maximum likelihood and promax rotation. Each item generally fit into the three factors. Hence, a second exploratory factor analysis was performed. In total, three items (PEE11, PEE10, and NER06) with a commonality of less than 0.3 were excluded. In addition, three items (PEE06, PEE08, and CgC08) with factor loadings less than 0.6 were identified and eliminated. A third factor analysis revealed a three-factor model with 20 items. This was consistent with the theoretical construct (Table 1).

Confirmatory Factor Analysis of the Re-TALE Scale. A confirmatory factor analysis was performed on the obtained data via robust weighted least squares estimation (WLSMV) to assess the factorial validity of the three-factor model. The analysis was conducted via lavaan (Rosseel, 2012) in R. According to the model, there were seven, seven, and six items in the NER, PEE, and CgC functions, respectively. Furthermore, the covariances between the factors were assumed. We used five indices to evaluate the fit of the model: chi-square measure of fit, comparative fit index (CFI), Tucker-Lewis index (TLI), root mean square error of approximation (RMSEA), and standardized root mean square residual (SRMR). In this study, the empirical criteria (Hu & Bentler, 1999) that CFI and TLI values greater than .95, RMSEA less than .06, and SRMR less than .80 indicate a good fit was used. The model fit indices were $\chi 2 = 419.550$, $df = 167$, $p < .001$, CFI = 0.954, TLI = 0.947, RMSEA = 0.084, SRMR = 0.075.

According to previous studies, RMSEA tends to have excessively high values and TLI tends to have low values when the number of samples is less than 250 (Hu & Bentler, 1999). There was also a study that used RMSEA as a criterion with an upper limit of 0.08 (Hooper

Table 1
Rotated Factor Loadings of Items on the Re-TALE Scale

No.	item	Factor loading 1	2	3	Communality	Mean	Standard Deviation
Factor 1: Negative Emotion Regulation (Cronbach's α = .91)							
3	NER03	.890	.012	-.110	.744	2.45	1.24
6	NER08	.887	-.062	-.030	.731	2.63	1.22
7	NER09	.815	-.029	-.002	.645	2.76	1.25
1	NER01	.806	.038	-.102	.627	2.39	1.15
5	NER05	.732	-.036	.125	.591	2.49	1.25
2	NER02	.624	.115	.008	.464	3.16	1.20
4	NER04	.619	-.075	.209	.472	2.42	1.22
Factor 2: Positive Emotion Extension (Cronbach's α = .87)							
10	PEE03	.141	.772	-.078	.655	3.79	1.02
9	PEE02	.009	.760	.007	.587	3.36	1.15
12	PEE05	-.103	.720	-.022	.460	3.89	1.06
8	PEE01	-.016	.720	.018	.520	3.95	0.96
13	PEE07	-.019	.676	.033	.465	3.43	1.18
11	PEE04	.232	.633	-.106	.513	3.47	1.20
14	PEE09	-.133	.608	.168	.415	3.75	1.10
Factor 3: Cognitive Change (Cronbach's α = .87)							
18	CgC05	-.136	-.018	.861	.670	2.81	1.26
16	CgC02	-.040	.028	.804	.643	2.77	1.24
19	CgC06	.046	-.035	.689	.480	2.68	1.22
15	CgC01	.069	.033	.675	.513	2.53	1.15
17	CgC04	.032	.005	.670	.468	2.42	1.18
20	CgC07	.054	.032	.601	.404	2.45	1.18
floor effect items and excluded items from factor analysis							
	NER07					1.89	1.10
	CgC03					2.08	1.10
	PEE10	.310	.190	.164	.286	2.61	1.30
	PEE11	.328	.196	.046	.228	2.29	1.25
	NER06	.126	.011	.427	.253	2.60	1.35
	PEE06	-.204	.577	.075	.314	3.17	1.20
	PEE08	.182	.560	.073	.474	2.96	1.19
	CgC08	.186	-.027	.523	.367	2.93	1.29
Factor correlations			.397	.344			
				.386			

Note. Factor loadings and commonalities for PEE10, PEE11, and NER06 are from the first exploratory factor analysis. The values for PEE06, PEE08, and CgC08 are from the second exploratory factor analysis. These six items were excluded from the final exploratory factor analysis due to lack of criteria. NER07 and CgC03 were excluded from the analysis due to a suspected floor effect. As this scale was developed in Japanese, no items were described in English to prevent misuse. For those interested in this scale, please contact the first author.

et al., 2008). Considering these previous studies, the results of the confirmatory factor analysis can be considered generally consistent with Ikeda (2015) in theory, although they deviate slightly from the criterion. Furthermore, as the main focus of this study was to test the reliability and validity of the Re-TALE scale, all items were used to calculate scale scores, rather than specifying covariance to improve model fit.

Convergent Validity of the Re-TALE Scale. Correlation coefficients were calculated between the Re-TALE and TALE scale scores (Table 2). The results showed that the social function in the TALE was significantly correlated with all Re-TALE factors. The self function was also significantly correlated with all retelling functions. Contrary to expectations, the directive function showed a significant correlation with the NER and PEE functions. In addition, tests of significance for the correlations showed that the coefficients between the social function and the PEE function tended to be higher than those for the other two TALE functions (PEE-Social coefficients and PEE-Direction coefficients; $t = 2.01$, $p < .04$, PEE-Social coefficients and PEE-Self coefficients; $t = 1.68$, $p < .09$).

Although the analysis showed higher frequency of use of social and PEE functions, these results do not fully support Hypothesis 1. These results indicate the uniqueness of the Re-TALE scale, which is specific to the social sharing situation of storytelling.

These results suggested that sharing emotional memories was important for the development, maintenance, and nurturing of social bonds (Bluck et al., 2005). Simultaneously, the finding that all retelling functions were related to the self function implies that the retelling of emotional memories to others contains an important element related to identity construction. This finding suggests that retelling has specific characteristics that differ from simple memory thinking and recall. The other-oriented function of making personal experiences useful to society was more important than formulating one's own future plans (Pillemer, 2003) in the social sharing situation of retelling. This indicates a reasonable basis in that the results between Re-TALE and the directive function are paradoxical to Hypothesis 1. Taken together, these results suggest that Re-TALE has unique functional characteristics that differ from those of the memory functions in TALE.

Table2
Correlation Coefficient between the Re-TALE Scale and TALE Scale

		TALE					
		Social		Self		Direction	
		r	*p*	*r*	*p*	*r*	*p*
Re-TALE	NER	.327	.000	.229	.011	.210	.029
	PEE	.369	.000	.234	.008	.209	.031
	CgC	.293	.000	.268	.001	.193	.068

Note. Probabilities of significance were calculated using the Bonferroni method to avoid increasing the alpha error due to repeated testing.

Study 2

We examined the reliability of the Re-TALE scale via the test-retest method.

Methods

Participants and Procedures. A total of 120 undergraduate students answered questions on a Google Form after they agreed to participate. The participants responded to the same questions again two months after the first survey. After those who did not respond to both surveys were excluded, responses from 82 participants (mean age = 18.78 years, *SD* = 0.79, 29 males and 53 females) were analyzed. The Re-TALE scale created in Study 1 was used. The Cognitive Emotion Regulation Questionnaire was also administered. However, its description was omitted, as it was different from the study's purpose.

Results and Discussion

The correlation coefficients between the subscale scores of the Re-TALE scale in Time 1 and Time 2 were calculated. The results showed a significant moderate correlation between Time 1 and Time 2 for each function (NER1–2; $r = .569$, $p < .001$, PEE1–2; $r = .499$, $p < .001$, CgC1–2; $r = .415$, $p < .001$). The intraclass correlation coefficient showed a moderate value of ICC(2,1) = .587 for the scale as a whole [for each subscale, ICC(2,1) = .559 for NER, ICC(2,1) = .486 for PEE, and ICC(2,1) = .410 for CgC]. Moderate correlations were also observed with the reliability of the Japanese version of the TALE scale (Ochiai & Oguchi, 2013). This suggested that the Re-TALE scale was reproducible.

Study 3

The convergent validity of the Re-TALE was assessed via an examination of the relationship between retelling function, subjective well-being, and metacognitive abilities.

Methods

Participants. A total of 281 undergraduates answered questions on a Google Form after they consented to participate. After those with incomplete data were excluded, the data from 268 participants (mean age = 19.19 years, *SD* = 0.96, 84 males and 184 females) were analyzed.

Retelling Function Scale. Similar to Study 2, the Re-TALE scale was used. Cronbach's alpha coefficients were calculated to verify the reliability coefficients. The reliability of all the factors was acceptable (NER = 0.86, PEE = 0.74, and CgC = 0.84).

Satisfaction With Life Scale (SWLS). The SWLS, developed by Diener et al. (1985),

Table 3
Correlation Coefficient between the Re-TALE Scale, SWLS, PRMQ and GMS

		Re-TALE					
		NER		PEE		CgC	
		r	*p*	*r*	*p*	*r*	*p*
SWLS		-.013	1.000	.100	.607	.272	.000
PRMQ	Prospective failure	.240	.001	.132	.313	.082	1.000
	Retrospective failure	.212	.005	.082	1.000	.004	1.000
GMS	Positivity	-.055	1.000	.163	.213	.201	.027
	Confidence	-.122	1.000	.046	1.000	.148	.431
	Anxiety	.185	.065	.156	.293	.091	1.000
	Task cognition	.023	1.000	.038	1.000	-.094	1.000
	Failure	.256	.001	.123	1.000	-.038	1.000

Note. SWLS = Satisfaction With Life Scale, PRMQ = Prospective and Retrospective Memory Questionnaire, GMS = General Metamemory Scale. Probabilities of significance were calculated using the Bonferroni method to avoid increasing the alpha error due to repeated testing.

was used to measure subjective well-being. This widely used scale is both reliable and valid (Koyasu et al., 2012). We used the Japanese version of the SWLS (Koyasu et al., 2012). The participants answered each question on a 7-point scale (1 = strongly disagree to 7 = strongly agree).

Metacognition. The Prospective and Retrospective Memory Questionnaire (PRMQ) (Maylor et al., 2002), a self-reported measure of the likelihood of retrospective and prospective memory errors, was used. It comprised 16 items rated on a 5-point scale (1 = never to 5 = very often).

The General Metamemory Scale (GMS) (Kawano, 1999) was also utilized. It comprised five factors (positive attitude toward memory, confidence in memory, anxiety regarding memory, recognition of task characteristics, and experience of memory failure) and 19 items rated on a 4-point scale (1 = disagree to 4 = agree).

Results and Discussion

The correlation coefficients between the Re-TALE scale and SWLS, PRMQ, and GMS were calculated (Table 3). The results showed significant positive correlations between the CgC function, SWLS, and positive attitude toward memory factor of the GMS. The positive attitude factor measured positive attitudes toward the acquisition of new knowledge (Kawano, 1999) and had common characteristics with the ability to recount negative memories with a positive perspective.

NER function was significantly positively correlated with the two factors of the PRMQ and experience of memory failure of the GMS. The PRMQ and failure factor of the GMS measured the subjective degree of susceptibility to memory failure. Hence, metacognition of susceptibility to memory failure, whether retrospective or prospective, was associated with higher NER function.

The results also suggested that CgC function contributed to memory reconstruction and well-being. CgC function was required in cognitive resources to transform negative perspectives into positive ones. Considering that a large amount of cognitive resources was associated with high life satisfaction (Diener & Fujita, 1995; Fastame et al., 2013), the finding that SWLS, positive metacognition, and CgC function were related was logically consistent with those of previous studies.

Conversely, a high perceived number of memory failures could indicate limited cognitive resources. The severity of depressive traits leads to higher cognitive dysfunction and poor social adjustment (Norman et al., 1988). Hence, we suggest that poor cognitive resources facilitate the use of NER functions and provide a coping strategy to stabilize the mental state through emotional identification and social sharing (Pudlinski, 2005). The results that a higher CgC is associated with higher subjective well-being and positive metacognition, whereas NER is associated with higher negative metacognition, generally support Hypothesis 2.

General Discussion

This study developed the Re-TALE scale to measure retelling functions and examined its reliability and validity. In Study 1, the Re-TALE scale had the theoretically proposed three-factor structure (NER, PEE, and CgC) and sufficient internal consistency with the subscales. In Study 2, we examined its reliability via the test-retest method. The results indicated that the scale had a moderate level of retest reliability, with significant moderate correlations between the same subscales.

In Study 1, Hypothesis 1 was not positively supported, highlighting the unique nature of the Re-TALE scale as distinct from the TALE scale. The social sharing of autobiographical memories through retelling is primarily a link between the self-function and the social function of autobiographical memory. Therefore, it is suggested that retelling itself facilitates the construction and maintenance of identity and social community related to autobiographical memory. Study 3 showed significant correlations between the Re-TALE and the subjective well-being and metacognitive scales. The results supported Hypothesis 2 and indicated the convergent validity of the scale. NER function was associated with negative metacognition, while CgC function was associated with positive metacognition and higher life satisfaction. These results suggested that Re-TALE scores were related to mental health.

The PEE function showed no stable results for any validation factor in Study 3. However, the results of Study 1 showed that the PEE function correlated more with the social functions of TALE than with the other two functions of TALE. This suggested that the PEE function was adapted to social functions, such as facilitating communication with others, rather than for internal processes, such as metacognitive features.

These results indicated that the developed Re-TALE scale was valid and reliable. Thus, those results not only indicated that the Re-TALE scale was a measure of the three social and introspective functions of memory retelling but also suggested that this unique instrument

could detect the cognitive characteristics involved in metacognitive traits and mental health. However, the results were obtained for undergraduates with an average age of approximately 20 years, and whether the participants of different ages internalized the same functions was not investigated. Harris et al. (2014) confirmed age differences in autobiographical memory function. We also found the relationship between the function of retelling and the function of autobiographical memory. Hence, age differences could exist in the Re-TALE scale. Members of individualistic cultures provided narratives that emphasized an individual, whereas members of collectivistic cultures provided narratives that emphasized harmony (Kuwabara & Smith, 2021). This suggested the possibility of cultural differences in the functions of retelling. Future studies should examine these issues.

Our results suggested the possibility that retelling function could predict the severity of psychiatric disorders. Therefore, future studies should thoroughly investigate whether NER and CgC functions are involved in various mental disorders, such as depression and post-traumatic stress disorder. We believe that exploring the clinical utility of retelling functions is socially meaningful.

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