

The necessity and possibilities of playfulness in narrative care with older adults

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Abstract

For us, narrative care is grounded in pragmatist philosophy and focused on experience. Narrative care is not merely about acknowledging or listening to people's experiences, but draws attention to practical consequences. We conceptualize care itself as an intrinsically narrative endeavour. In this article, we build on Lugones' understanding of playfulness, particularly to her call to remain attentive to a sense of uncertainty, and an openness to surprise. Playfulness cultivates a generative sense of curiosity that relies on a close attentiveness not only to the other, but to who we each are within relational spaces. Generative curiosity is only possible if we remain playful as we engage and think with experiences and if we remain responsive to the other. Through playfulness, we resist dominant narratives and hold open relational spaces that create opportunities of retelling and reliving our experiences. Drawing on our work alongside older adults, as well as people who work in long-term care, we show the possibilities of playfulness in the co-composition of stories across time. By intentionally integrating playfulness, narrative care can be seen as an intervention, as well as a human activity, across diverse social contexts, places and times.

KEYWORDS

care, dementia, long-term care, narrative, older adults

1 | INTRODUCTION

While narrative care has been conceptualized as an ongoing process of becoming better story listeners (Kenyon & Randall, 2015), our understanding of narrative care is broader. We conceptualize care itself as a narrative endeavour (Berendonk, Blix, Randall, Baldwin, & Caine, 2017; Blix, Berendonk, & Caine, 2019) that is an active, relational, dynamic and dialogic co-composition of experiences. In our conceptualization, narrative care is a matter of creating opportunities for narrative expressions, a matter of actively engaging in storytelling activities, and a matter of active acknowledgement that experiences are always unfolding in the living. It is a way of

making sense of the world together, with, or without, spoken words. Narrative care does not depend solely on the spoken word, or on the ability to tell stories of our experiences, as it is a communicative embodied activity, that involves 'other – embodied – persons' (Hydén, 2013, p. 235).

Narrative care requires playfulness and world travelling, two of Lugones' (1987) key concepts. Within narrative care, world travelling allows us to identify with the other 'because by travelling to [the other's] 'world' we can understand what it is to be them and what it is to be ourselves in their eyes' (Lugones, 1987, p. 17). Playfulness within world travelling requires an openness to uncertainty and 'to surprise' that acknowledges that each of us 'are not fixed in particular constructions of ourselves', but 'are open to self-construction'

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(Lugones, 1987, p. 16), and in other words, we are open to composing new stories to live by (Connelly & Clandinin, 1999). It is playfulness within world travelling that creates spaces for shaping new stories to live by (Caine & Steeves, 2009). World travelling with playfulness cultivates a sense of curiosity that relies on close attentiveness to the other, as well as to who we are in each relational space. Through playfulness, we resist dominant narratives and hold open relational spaces that create opportunities of retelling and reliving our storied experiences.¹

Within a concept of narrative care, we understand that people, older adults, caregivers and others are always *in the midst of stories* within each of our unfolding lives (Clandinin & Connelly, 2000). To honour this sense of living in the midst means, in narrative care, that people meet between worlds and actively create common, or shared, worlds; worlds in which the unimaginable may become imaginable, where we recognize the other and engage in each other's worlds with loving perception.

Clandinin (2013) developed the concept *stories to live by* as a narrative expression of identity in order to make visible who we *are*, and *are becoming*, within nested contexts over time. This concept resonates with our understanding of narrative care and offers a more dynamic and forward-looking concept than 'life stories'. While each person has many 'life stories', the stories are not necessarily continuous and/or coherent. Our stories are not merely representations or metaphors for 'real life' but are a way of being, of becoming, of living, and of making sense of the world. The concept *stories to live by* attends to the lifelong process of *becoming*. Rather than something we *have*, our stories are something we *are*. Our stories are always in the midst and are never completed or finalized.

In this paper, we further develop our conceptual understanding of narrative care by calling forward two stories from our work alongside older adults and persons who work in long-term care. In doing so, we show the necessity, and possibilities, of world travelling with playfulness in narrative care. Playful world travelling, which we argue is essential to narrative care, allows us to move past fixed stories that restrict processes of being and becoming. While narrative care will not resolve issues of the past, it creates the potential to gain new insights and possibly new futures. The stories draw on experiences from two research projects, one involving Indigenous Sami²

older adults (Blix, 2013) and one involving professional care providers in long-term care (Berendonk, Kaspar, Bär, & Hoben, 2019). The first story makes visible the relational aspects of narrative care; the second story makes visible the embodied and forward-looking capacities of narrative care. Through these two stories, we demonstrate how narrative care holds open the possibilities for world travelling temporally, within relational spaces, and within place. Moreover, we demonstrate how narrative care involves openness to surprise that resists dominant narratives of older adults, dementia and long-term care and has the capacity to change those involved.

2 | A STORY TO LIVE BY: INGA'S STORY

Several years ago, while Bodil was conducting her doctoral work, she met Inga, an Indigenous Sami woman in her 90s who had grown up in a traditional reindeer herding family in a small Sami community. At some point in their conversation, Bodil asked Inga what her dreams for the future had been when she was a child, and Inga told the following story:

There was this older teacher. She came all the way from the South. [...] She had no children of her own, and she wasn't married either. She wanted to bring a Sami child to the South, to let the child go to school there, and she would pay for school for this child. [...] If I went with her, I would have my own room and she would buy me clothes and everything. She promised. And I was so happy! I could go there and attend school! But then, I went home and told [my mother] what the teacher said... "She wants to take me there so I can learn, I can go to school there - there are lots of schools there." At first, my mother didn't say anything. Then, she said, "You will learn to sew Sami clothes. That's enough school for you!" She said that she would teach me to sew Sami clothes and that I would marry a Sami man, a reindeer herder, "No, I don't want to get married. Never!", I said. I told the teacher, "You have to talk to my mother!" But my mother said no: "Inga is not going anywhere! She will learn to sew Sami clothes, and she will marry a Sami man with reindeer." And so it was. I was really angry with my mother. I cried and cried, but it didn't help. The teacher took another girl from the orphanage. [...] My mother said, "You can live from sewing Sami clothes. Not everybody can do that! But you can learn to do it." [Pause] And so it was.

After a moment of silence, Bodil asked Inga, 'When you look back at your life now, do you think that it turned out as you wished?', and she replied, 'I do not regret marrying him. No. Then things turned out well.' Inga offered Bodil this conclusion, not as a way to foreclose her story, but in a way that allowed Bodil a way to

¹Clandinin and Connelly (2000) work with four terms, living, telling, retelling and reliving, within narrative inquiry. 'We imagine...there is a reflexive relationship between living a life story, telling a life story, retelling a life story, and reliving a life story... we lived out stories, told stories of those experiences, and modified them by retelling them and reliving them' (p. 71). While our conceptualization of narrative care draws on understandings of narrative inquiry (Clandinin & Connelly, 2000), narrative care is not the same as narrative inquiry.

²The Sami are an indigenous people living in Norway, Sweden, Finland and Russia. The national states have made strong efforts to assimilate the Sami into the majority population. In Norway, this process is often referred to as Norwegianization. The church and the school system were central instruments in the assimilation processes. The use of the Sami languages in schools was strictly prohibited until 1959. Moreover, residential schools were powerful arenas for the Norwegianization of Sami children. The assimilation policies were based on a dominant narrative about Sami inferiority. Even though the national states have officially left the assimilation policies, Sami people still experience stigmatization and everyday racism.

engage and think with her experiences—to imagine the *what ifs* in Inga's story, and, perhaps, the *what ifs* in Bodil's stories. Andrews (2014) emphasized the role of imagination because it is 'the drive of the imagination which impels us to ask "if only" of our pasts, and "what if" of our futures [...the] imaginative urge which gives us the ability to contemplate on a world that might have been, as well as one which might still be' (p. 4).

Older adults' narrations about 'roads not taken', such as the one Inga told Bodil, open up questions about the stories we tell about our lives. Often the stories we tell and retell are chosen for a purpose and for an audience in specific interpersonal and discursive contexts (Blix, Hamran, & Normann, 2015). The meeting between Inga and Bodil was a meeting between two women who lived their lives under very different circumstances. They lived their lives in what could be considered two different worlds. Yet, through their narrative engagement, they created a common world they could playfully explore. Inga invited Bodil to world travel to her childhood and to the different worlds of opportunities that she was offered by her mother and by her teacher. As we retell this story fragment, we wonder if the story echoed Inga's awareness that Bodil was also Sami. Did Inga invite Bodil in to wonder with her about Bodil's life, as well as her own? Did Inga tell this story in ways that resonated across both of their lives, despite different social, political, historical and familial contexts? Did Inga's story fill the relational space between them with imaginative possibilities, possibilities of imagining the living and reliving of this experience for Inga? Inga storied her life as one with *no regrets*, even though as a young child she was filled with sadness about giving up the possibilities of attending school in the south of Norway. How did this story shift Inga's relationship with her mother and how has it shaped her experiences alongside her husband? And how did Inga's telling of the story shift the relationship between Inga and Bodil?

Through Inga and Bodil's active engagement, they co-constructed a world that acknowledged the dreams Inga had so long ago, the life Inga could have lived, the life she lived, and the person she became and is still in the process of becoming. Through this narrative engagement, both Inga's childhood dream and the life she lived were acknowledged as part of who Inga was and was becoming.

3 | PLAYFUL WORLD TRAVELLING AS EMBODYING THE RELATIONAL ASPECTS OF NARRATIVE CARE

At the heart of narrative care is the active, dynamic and relational co-construction of stories from experience. This process and the stories arising from it both have the capacity to change all those involved. Inga chose to tell this particular story to Bodil, and she chose the way she composed the story in the particular moment. As a response to the invitation to tell about who she *was*, Inga chose to tell a story both about who she could have *become* and who she became. In that sense, Inga's story is an invitation to Bodil, and to herself, to

engage in playful world travelling by connecting 'threads of [...] experiences in new ways [and] trying out new ways of being' (Caine & Steeves, 2009, p. 3).

Inga and Bodil's engagement included playful world travelling back and forth in time, travelling to worlds that happened long ago and worlds that lived only in imagination. Bodil's question ('When you were a child – what were your dreams for the future?') was an invitation both to look back, from the perspective of an old woman, at the young girl growing up in a small Sami community at the beginning of the 20th century, and to look forward, from the perspective of the girl, at the life Inga had lived and was living. The young Inga was so present and alive in the story, in the way Inga voiced the young girl's anger and disappointment ('I was really angry with my mother. I cried and cried, but it didn't help.'), as was the older Inga with all her life experience and wisdom ('I do not regret marrying him. No. Then things turned out well.').

When we consider Bodil's question ('When you were a child – what were your dreams for the future?'), we see Bodil imagining those childhood possibilities that Inga may have held as dreams, dreams that were no longer visible in who Inga had become. Bodil's question may have come from her own knowing of herself as a child who had dreamt of who she would become, of her dreams for herself.

Inga's narration was a story about the attempt of an authority figure from the majority society to 'save' a Sami child from her own community and her own culture. Within this context, Inga's narration is positioned among numerous stories of authorities removing Indigenous children from their families and communities to make them into 'proper' citizens (cf. Milloy, 1999). Inga's story was both a story about the potential abandonment of place and the community of home, and a story about the importance of home and community. There is a contrast between Inga's story and the story 'The Forsaken Brother' by the Chippewa woman Bamewawagezhikaquay, also known as Jane Johnston Schoolcraft, retold by Pratt in *Native Pragmatism: Rethinking the Roots of American Philosophy* (Pratt, 2002). The story is about three children who, one after the other, leave home to settle elsewhere after their parents' death, leaving the younger brother behind, alone. After a time, a friendship evolves between the abandoned boy and some wolves. By spring, the boy and the wolves travel, and one day, they pass by a lake where the oldest brother is fishing. The oldest brother hears his younger brother crying 'My brother, my brother/ I am now turning into a Wolf!'. And as the oldest brother tries to catch the younger, the boy flees and physically transforms into a wolf. While this story is about broken promises and the abandonment of a brother, it is also a story about abandonment of place, community and home.

Unlike the older siblings in the story about the forsaken brother, Inga never abandoned her home, her community, and her family, although in her response to Bodil, she expressed her childhood anger and sadness at not doing so. She expressed a deep yearning to leave in order to attend schools and to learn. The consequence of going would have meant that, at least for a time, she would have abandoned her home, her community, and her family. She did not go because her mother would not allow her. She stayed, learned

traditional Sami handicraft, and married a man deeply embedded in the traditional Sami reindeer herding culture. Because of her mother's decision, which became the force which shaped Inga at that time, there was not 'a breakdown in the relations of the human community that was part of the place' (Pratt, 2002, p. 224) in Inga's story. She never transformed into 'the others', that is, became a member of the Norwegian majority population. Thinking with Inga's story and the story about the forsaken brother now, many years later, Bodil realizes that she herself has mainly lived, and is still living, her life among 'the others', detached from traditional Sami communities and culture. She has, in many ways, become 'the other'. In this perspective, Inga's invitation to travel with her back to the place she grew up, was perhaps also a way for her to remind Bodil of the importance of community and a loving invitation into community. In that sense, Inga's and Bodil's narrative engagement illustrates the reciprocity of narrative care, and its capacity to change all those involved. By travelling to the intersections between Inga's story, the story about the forsaken brother, and her own stories, Bodil gained new insights about her own life and her own experiences.

4 | Resisting dominant narratives

As we think with Inga's story now, we wonder if the story she tells in response to Bodil's invitation to tell of her dreams for the future when she was a child is a kind of resistance to the dominant narratives of Indigenous Sami that were composed around plotlines of deficiency, inferiority, and being 'less than', less educated, less sophisticated, and less civilized. While Inga tells her story as one in which, as a child, she saw the possibilities for education and was sad that her mother denied her those opportunities, she also tells that her experiences were a resistance to those 'less-than' narratives of the Indigenous Sami in the past and present. Was her story of her mother's refusal to let her go with her teacher an attempt at disrupting dominant narratives about the Indigenous Sami in past and present, stories that always positioned her at the margins of Norwegian society? Pratt writes of the logic of place and the logic of home in the United States. For Pratt (2002), the logic of place created the possibility for cultural pluralism by showing 'a way of understanding the relationship between people, culture, and home' which 'makes explicit the elements that sustain different cultures and interactions among them: history, people, practices, and land. The logic of home focuses on the complex relations that constitute the interaction of difference within culturally distinct communities' (p. 228–229). Drawing on Child (1972), Pratt shows that history of place 'is found in the "domestic detail," the particulars of the lives and relations that occurred in a particular location. More than a story of place, then, meaning becomes a story of the domestic context where "domestic" is taken in its oldest sense of having to do with where one lives, one's home and relations' (Pratt, 2002, p. 235). It is here that the logic of place is transformed into a resistance that Pratt refers to as 'a logic of home'. Drawing on Indigenous and female writers, Pratt shows that the logic of home helped to organize both internal and external

resistance to the colonial attitude. The domestic details do not become oppressive, but shape possibilities of resistance.

As we turn to the storied event in Inga's story, that is, the refusal of her mother to allow Inga to be taken away, we see a logic of home as a way of resisting the dominant narratives as Inga tells of her mother saying, 'Inga is not going anywhere! She will learn to sew Sami clothes, and she will marry a Sami man with reindeer'. In Inga's telling, her mother draws on the domestic details, the particulars of the lives and relations that occurred in a particular location to resist, that is, to frame a resistance narrative. And Inga, in responding to Bodil's invitation to tell of her hopes and dreams, also draws on a logic of home as she offers her story around the plotline of 'I do not regret marrying him. No. Then things turned out well'.

Given the historical and social narratives that shaped the relations between Inga's Sami mother and Inga's school teacher from the South, her mother's refusal to let Inga go was an act of resistance. Her mother refused, knowing that she was disappointing her child but also showing her that the Sami plotline was a way to compose a life, a life that resisted the colonial attitude. Inga made her mother's resistance her own by emphasizing it in her narration. Both Inga's story of her mother and her story of herself were refusals to circulate dominant narratives that would have imposed limitations on the imaginative space they were co-composing, a space that Inga invited Bodil into.

Narrative care is never about finalizing stories and defining who are heroes and who are villains. Rather, in Inga's and Bodil's engagement, both the mother and the teacher were acknowledged as important for who Inga was and was becoming. There was an undertone of vulnerability in Inga's story. Her story demonstrated the stronghold of the dominant narrative about the inferior Sami. Prior to the story about the teacher from the South, Inga told Bodil she tried to live as decently as possible all of her life in order to prove wrong all those who think Sami people are inferior: 'Perhaps people think the Sami are not as good as other people. I think this is because they don't know better'. The embodied experience of belonging to a stigmatized minority group was evident in the way Inga had been constantly conscious of her conduct and thereby took responsibility for how all Sami were perceived by the majority. Was this part of her motivation for telling this particular story to Bodil? Thinking with this story now, many years later, we realize that Inga may have felt that she had to prove, even to Bodil, that 'the Sami are as good as other people'.

In contemporary western societies, education is considered a virtue. As we continue to think with Inga's story, we notice that she did not tell it to Bodil as a story about *lost* opportunities for education, although she may have seen it in that way when she was a child. In her telling of the story at Bodil's invitation, Inga came to appreciate that there was another knowledge and education, a familial cultural curriculum being offered in her home place. In her telling of her experiences, Inga resisted dominant ideas of knowledge and education and came to see that, as her mother had suggested so long ago, there was another knowledge at work. Inga told her story as having lived with an alternative view of knowledge, a view expressed by her

mother as 'You will learn to sew Sami clothes. That's enough school for you!?' Perhaps Inga was telling Bodil, the PhD student from the university, that there are forms of knowledge and skills you cannot learn in schools. That such knowledge and skills are transmitted and transformed in close interpersonal relationships ('She said that she would teach me to sew Sami clothes...'), and that learning this type of knowledge and skills is a privilege ('Not everybody can do that! But you can learn to do it.'). Once again, we are reminded of the reciprocity of narrative care and its capacity to alter relations. Bodil has undoubtedly had opportunities in her life that Inga, who grew up in a different time, place and socio-historical context, never had. However, Inga also had opportunities that Bodil, who has lived her life in the Norwegian majority society, has never had.

5 | PLAYING WITH FORWARD-LOOKING AND EMBODIED STORIES IN LONG-TERM CARE: WATCHING THE STARS

As we inquired into the experiences of Inga and Bodil, we focused on critical aspects of narrative care that forefront the relational aspects of playful world travelling. We showed how playfulness relies on a close attentiveness not only to the other, but to who we each are within relational spaces. We now shift our focus to narrative care as a possible intervention in long-term care settings. As an intervention, the focus is on co-composing stories between care providers and residents. Creating practices of co-composition through playful world travelling holds the potential to resist dominant stories of long-term care.

Residents who live with dementia are often storied in particular ways by the dominant institutional narrative that tells us that they are incapable of sharing experiences, of telling coherent stories, of connecting their past experiences to their present experiences and are not able to create new narratives in this phase of their lives (Baldwin, 2006; Hyvärinen, Hydén, Saarenheimo, & Tamboukou, 2010). In addition, Baldwin and Estey (2015) noted that the substitution of formal, institutional relationships for personal ones through admission into long-term care may lead to 'narrative loss', that is, 'disruption, forestalling, foreclosing, silencing, and so on' (p. 206). While that may be true, we have experienced that care providers are often significant persons for people living in long-term care institutions. In narrative care, care providers are critical, as they work and live alongside older adults, as they share experiences, and as they interact in ways that allow new narratives to evolve.

Charlotte still vividly remembers an experience more than 12 years ago. She was managing and coordinating an intervention study in German nursing homes. The objective of the study was to empower care providers in developing meaningful interventions to improve the quality of the moment of persons living with dementia (Berendonk et al., 2019). Workshops were held to identify and create potential interventions

for selected residents. In one such workshop, a care provider talked about a particular resident. Through conversations with the resident as well as with some of her family members, the care provider had learned that the woman enjoyed looking at the stars. She had always been fond of star constellations and watching the night sky. After reporting this information to other workshop participants, the care provider continued to share his ideas about possibilities for the woman to engage in star watching. He eagerly suggested that they get a telescope, and he wanted to bring books about star constellations to the nursing home. However, the other workshop participants laughed and made statements such as "We don't have the money to buy a telescope!" and "She has dementia, how should that work?". Faced with other participants' reactions, the care provider became more and more quiet. He was disappointed that his colleagues did not support him and rather made fun of him. As workshop facilitator, Charlotte stated, "let's not discard ideas because they seem impossible to realize." Reminded of the importance of being respectful, open, and playful, workshop participants continued to share and develop ideas of possible interventions. In the end, the team members agreed to decorate the ceiling of the woman's room with fluorescent stars and to get a calendar with star pictures for her room. Moreover, they reminded each other of the possibility of sitting with the woman on the balcony, under the clear sky, watching the stars.

Stories are told within many worlds and within relationships that shape, and often limit, our possibilities for telling, retelling, living and reliving experiences. The stories we tell and are told about dementia, persons with dementia, old age and long-term care impose limitations on our imaginative space. Descriptions of the prevalence of dementia are often 'epidemic', 'crisis', or even a 'plague', and metaphors such as 'war', 'crusade' and 'tsunami' are frequently used. Such linguistic representations are echoed in the stories we tell, and are told, about dementia, and they create a distance between 'us' and 'them' (Zeilig, 2013). Persons with dementia have been inscribed as subaltern (Gilmour & Brannelly, 2010), that is, disempowered or marginalized, and as incapable of producing 'coherent accounts of the world they live in' (Crehan, 2002, p. 104). Moreover, stress, coping and caregiver burden are core elements in the dominant narratives about care for persons with dementia (Adams, 1998). Witham and Haigh (2018) noted that 'the biomedical narratives' of dementia pose challenges for both persons living with dementia and for care providers because they often overlook that humans are narrative beings. Older adults living with dementia and their care providers and caregivers share and co-compose narratives, which are not part of the biomedical view of dementia. Care providers in long-term care are often storied as transient (Riggs & Rantz, 2001), disengaged

(Ward, Vass, Aggarwal, Garfield, & Cybyk, 2008) and focused on the physical and medical aspects of care (Daly & Szebehely, 2012; Song, Hoben, Norton, & Estabrooks, 2020), and long-term care settings and facilities are often described as 'places to die rather than places to live' (Schoenberg & Coward, 1997), or settings deprived of any or very restricted resources in staffing (Vaismoradi, Wang, Turunen, & Bondas, 2016) and financial resources (National Institute on Ageing, 2019).

Looking back at Charlotte's experience, we notice how dominant narratives about persons with dementia were echoed in the interactions between workshop participants ('She has dementia, how should that work?'—implying that the woman has no resources left, the story is closed). Further, participants' playfulness and imaginative spaces were restricted by fixed stories about long-term care settings ('We don't have the money to buy a telescope!'). However, throughout the workshop, participants managed to move beyond these restrictions and engage in the playful imagination of possibilities. Charlotte's experience highlights the importance of being open to the possibilities of potential new narratives, and the ever-present opportunities of co-composing new forward-looking stories in narrative care. Rather than shut down the possibilities, the care provider's ideas were acknowledged and used playfully in the co-creation of potential interventions. In that sense, the workshop participants were connecting parts of *their* experiences in new ways and were trying out new ways of being (Caine & Steeves, 2009).

Charlotte's experience reminds us that narrative care with older adults involves acknowledging people's stories about their pasts at the same time as it requires their active engagement in the co-creation of new forward-looking narratives in the present. There has been a call for narrative approaches in long-term care. Approaches such as reminiscence work (Cooney et al., 2014) and life story work (Noonan, 2011) are, indeed, based on the appreciation of people's stories. These approaches, however, tend to focus on older adults' stories about the past. This often results in older adults being primarily encouraged to tell stories about their past rather than stories about imagined futures. In her description of the workshop, Charlotte describes how one care provider used what he knew about the woman's passions and interests playfully and imagined potential interventions, such as organizing a telescope. He engaged in 'what if [...] a world [...] which might still be' (Andrews, 2014, p. 4)—using his imagination to create a new narrative for the star-loving woman. Therefore, narrative care implies the co-creation of new stories, which is a succinct distinction to reminiscence work and life story work, if those approaches only focus on recalling past experiences. Playful world travelling, which we argue is essential to narrative care, allows us to move past fixed stories that restrict processes of being and becoming.

Dominant narratives about stories and storytelling may also impose limitations on our imaginative space. Hyvärinen et al. (2010) noted that 'the coherence paradigm'—the idea that coherence is a norm for life stories—may marginalize individuals who cannot tell stories in manners that correspond with our assumptions about stories. Furthermore, the dominant understanding of narrative tends

to presuppose the centrality of language in narration. Such understandings of narrative lead to what Baldwin (2006) conceptualized as 'narrative dispossession'—the exclusion of stories and storytellers that do not fit our assumptions of what stories and storytelling are.

Narrative care is a way of making sense of the world together, with or without spoken words. When the capacity to tell stories is compromised, narrative care requires attentiveness to movements and gestures and to embodied interactions as meaningful communication. Charlotte's experience demonstrates the possibilities of playfully co-creating new narratives without using language and allows for the creation of situations in which bodies 'talk'. Throughout the workshop, participants collaboratively expanded their imaginative space and became able to imagine the woman sitting on a balcony next to a care provider, in silence, in awe, both amazed by a beautiful night sky. They realized that words are not necessary to co-create powerful experiences, to create 'Quality of the Moment' (Pringle, 2003, p. 9).

This conceptualization of narrative care challenges dominant narratives of dementia and persons living with dementia as well as challenges dominant stories about long-term care settings. Moreover, narrative care challenges dominant narratives about stories, storytelling, and who storytellers are and are becoming. The provided example showed that care providers are often significant persons for people living in long-term care institutions. In narrative care, care providers are critical, as they work and live alongside older adults, as they share experiences, and as they interact in ways that allow new narratives to evolve.

6 | CONCLUDING THOUGHTS

Clandinin, Caine, and Lessard (2018) identified five interrelated dimensions within the relational ethics of narrative inquiry which resonate with our understandings of narrative care: the necessity of engaging with world travelling with imagination, improvisation and playfulness; the necessity of moving slowly in ways that allow for listening and living; the necessity of ethical understandings as always in process; the necessity of always engaging with a sense of uncertainty; and the necessity of understanding that ethical relations are always lived embodiments (p. 193). By calling forward two stories of our work alongside older adults and persons who work in long-term care, we illustrated the necessity and possibilities of playfulness in narrative care. Our overarching question is: How do we remain playful in the face of dominant narratives and within the social, interpersonal, historical, cultural and structural contexts that shape our possibilities for being and becoming? We believe that part of the answer is to acknowledge that narrative care is something broader and more comprehensive than listening to stories. First of all, narrative care is the acknowledgement of the here-and-now moment, that is, a shared world co-created and playfully explored by those involved in narrative care. Second, narrative care is the acknowledgement that we all have pasts, and we all have futures. Our embodied stories of the past and our hopes for the future shape our possibilities for playful world travelling into each other's worlds of who we are, and are becoming, as people, and as people in relation.

Shaped by the multiple worlds and relationships we find ourselves in, all of which shape new possible experiences, we further our understanding of narrative care. Narrative care allows us to move past fixed stories and experiences. By engaging in narrative care, we hold all stories open to inquiry and possible retellings and relivings, not because we want to forefront pain or regret or a sense of loss, but because we can gain new insights and understand people in new ways. In many ways, we look backwards and forwards to continue to learn. Narrative care is about this opening to learning, to surprise, to ways in which we can retell and relive our lives in ways that allow us to become otherwise (Greene, 1995).

ACKNOWLEDGEMENTS

We are grateful to Marie Cave for valuable and insightful comments on earlier drafts of this article.

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How to cite this article: Blix BH, Berendonk C, Clandinin DJ, Caine V. The necessity and possibilities of playfulness in narrative care with older adults. *Nurs Inq*. 2020;00:e12373. <https://doi.org/10.1111/nin.12373>