

May 18, 2022

# Narrative Care

## We Are the Story Species

→ Presenter: Gigi Amateau, PhD



**VCU**

Gerontology

College of Health Professions



VIRGINIA DEPARTMENT OF  
SOCIAL SERVICES



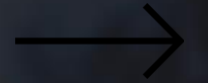
# HOUSEKEEPING

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# TODAY:



**Define narrative care**



**Share examples of everyday narrative practices**



**Consider essential narrative skills**



**Examine some narrative traps relative to elders (and all of us!)**

# Hello!

USE Q&A TAB TO ANSWER



1. What would you like to be called today?
2. What is one success you've had in the past week?
3. What is one goal you have for today?

“We age biographically as much as we age biologically, psychologically, and socially.”

# Narrative Care

Storytelling is fundamental to being human

Facticity and possibility

Time: Past, Present, Future

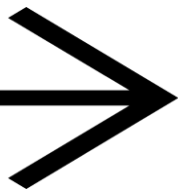
Concepts

narrative/story

embodied narrative

narrative identity

**APPROACH**



# 3 questions

1

Agency in the **Present**: What would you like to be called today?

2

Positive anchor to recent **Past**: What is one success you've had in the past week?

3

Positive anticipation of the near **Future**: What is one goal you have for today?

The nature of time and story: Let's revisit our opening reflection.

“We are all  
narrative  
beings.”

# Narrative Care



Narrative / Story

Embodied narrative

Narrative identity

“Because we enter the story, we must explore its complexity and challenge our own morality.”

# Narrative Care

Close listening

Allowing our own emotions and feelings to be present, helpful, and informing

**SKILLS**



Self-stilling, as we discern the course and source of care

Taking time to reflect

Imagination

Playfulness

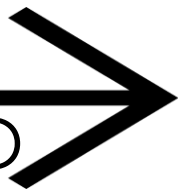
World travelling (into the stories of others!)



Narrative care entails acknowledging and respecting the unique experiences and stories of each person's life.

# Narrative Care

FORMAL  
MODELS AND  
METHODS



Collage work

Storysharing with CNAs and Elders

Life review

Motivational interviewing

Reflective writing

Personal description or "comfort cards"

A strengths-based approach

Person-centered thinking tool

People tell their own story

Engages people in thinking and planning for the future

Will change over time



## **BEST PRACTICE:**

**One-page  
personal  
description or  
comfort card**

## WHAT IS IMPORTANT TO GIGI

Time for spiritual devotion  
Laughing and thinking with family and friends  
Time outdoors with trees, birds, my dog and my mom  
Taking a shower every morning  
Having tea and quiet in the afternoons  
Daily yoga practice  
A journal to write in and Ticonderoga #2 pencils  
Being surrounded by a variety of books

## WHAT PEOPLE ADMIRE ABOUT GIGI

Thoughtful  
Creative  
Genuine  
Serene  
Curious  
Generous  
Funny  
Enthusiastic  
Asks good questions  
Writes books for kids

## SUPPORTS GIGI NEEDS TO BE HAPPY, HEALTHY AND SAFE

Flexible schedule with free time, too  
Space and time to figure things out  
Ongoing inner ear and balance work  
A gluten-free, lactose-free diet  
Not to get overbooked  
Hearing aids and glasses  
Freedom to sing loudly in the morning  
Epson salt bath when stressed or sick  
Talking with my aunt Mary  
Walking outside  
Check in with me when I check out  
Reassurance when I am afraid  
Not to be blindsided  
Feeling the wind, seeing and hearing the river or water



*You will show me the path of life, in your presence is fullness of joy*

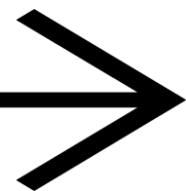
*Psalm 16:11*

# COMFORT CARD EXAMPLE

“We construct who we are through storytelling.”

# Narrative Care

**EVERYDAY  
PRACTICE**



Being interested in a person's stories

Taking notice of a person's stories

Showing respect for these stories

Opening space to systemically co-create stories

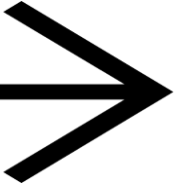
Being aware of narrative traps

“Our certainty gets in the way; our imagination opens up options.”

# Narrative Care

Valuing “small stories” as well as “big stories”

Co-creating stories about the future not only the past

**AVOID**  
**NARRATIVE**   
**TRAPS**

Broadening our attention and valuing to include stories without a beginning, middle, and end

- Practice recognizing stories that are expressed without words
- Accepting that not all stories are expressed coherently [to us]

# Captain Joyner

Proud military veteran Bob Joyner, now in his early 90s, just moved in with his daughter and son-in-law. He participates in adult day Monday – Friday.

At admission, he answered the social worker that he would like to be called Captain Joyner.

One staff person calls him Captain Joyner. Everyone else calls him Bob.



In this story, what is the everyday narrative practice?

What do you make of this scenario?

Is it important to Bob Joyner's story to hear himself called Captain Joyner? Why?

# Mrs. Ada Johnson: These Feet Were Made for Dancing!



In this story, what is the care task? What is the everyday narrative practice?

What do you notice about the dimensions of time here?

How has Cindy started a new story with Mrs. Johnson?

Mrs. Ada Johnson experiences discomfort in her feet.

The doctor has suggested a daily application of OTC foot cream. Mrs. Johnson's regular CNA, Cindy, makes a big production of it:

*"These pretty feet have taken you from Norfolk to New York City and back, haven't they?"*

As Cindy massages the cream into the tops and bottoms of Mrs. J.'s feet, she also rubs her ankles and calves with Jergens. "Yep, I'd say your feet take good care of you! Almost 100 years of going wherever you want to go. Where to next?"

With a mischievous look, Mrs. Johnson says, "Dancing!" Cindy doesn't miss a beat. "Ohhhh, yes! The Valentine's Dance is Friday in the auditorium. They've hired a Motown cover band. Let's go!"

You are a story  
being, too.

# Narrative Care

STORIES OF THE  
WORKFORCE 

At shift start: 5-10 minute Somatics & Stories

Regular opportunities for staff to celebrate  
resident/participant successes

Regular opportunities for staff to grieve and  
acknowledge loss and importance of  
relationships with residents/participants

Dedicated peer support time

Dedicated staff narrative practice time

Solicit and hear staff observation



# Marisol & Inez: Bonjour, Madam!



In this story, what is the everyday narrative practice?

Whose story is this?

How did Marisol participate in creating a story with Inez?

Marisol didn't use language to convey her joy at hearing French. How did Inez know that what she was doing connected to Marisol's story?

Marisol, diagnosed with dementia at 65, lived at an assisted living facility in rural Virginia for the last five years of her life. She recently passed at the age of 80.

For thirty years, she taught French at the county high school. She loved all things France! Her primary care provider, Inez, spoke simple French with Marisol at every possible occasion, much to Marisol's delight.

"Bonjour, Madam!" Inez would say at breakfast time and watch Marisol's face light up. Whenever Inez would ask *how are you* by saying "Comment allez vous?", Marisol would laugh heartily.

Two hundred people attended Marisol's graveside service; she was beloved throughout the community. Inez was there in her beautiful bright pink scrubs and shimmery rose gold mask. The eulogy celebrated Inez's role in Marisol's life and the gathered community heard the story of how Inez spoke French with Marisol.

People's identities are shaped by their stories.

Story is a "thing" and also a process.

We each have a past, present, and future...every day of our lives.

Seek out opportunities to co-create story.

A tool and a means for providing quality, person-centered, trauma-informed care.



# Summary

**We each  
offer  
narrative  
care every  
day.**

# References

- Berendonk, C., Blix, B., Randall, W., Baldwin, C., & Caine, V. (2017). Care as narrative practice in the context of long-term care: Theoretical considerations. *International Journal Of Older People Nursing, 12*(4), 1-9.
- Blix, B. (2016). The importance of untold and unheard stories in narrative gerontology: Reflections on a field still in the making from a narrative gerontologist in the making. *Narrative Works: Issues, Investigations, & Interventions, (6)*2, 28-29.
- Randall, W., & Kenyon, G. (2004). Time, story, and wisdom: Emerging themes in narrative gerontology. *Canadian Journal on Aging / La Revue Canadienne Du Vieillissement, 23*(4), 333-346.

# 3 questions

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The nature of time and story: Let's revisit our opening reflection.

**Our Break will be  
followed up by:**

**Panel Discussion with**

**Catherine McCray**

**Judy Nelson**

**Elmira Pitchford**

## **Panel Discussion:**

# **How the Sausage is Made: Eldercare Professionals**

## **Moderated by:**

**Jay White, EdD, MSG,  
CDP**

1

## **Judy Nelson**

Judy is an RN (BS, RN) with a wide variety of work experiences spanning from 5 decades. She entered the field of Public Health Nursing in 1995, where she remained until 2016.

In her last years in nursing, she worked for Senior Connections as their Home and Adult Day Care Manager - later as the Family Caregiver Education and Support Manager.

Judy is a frequent panelist and participant with VCU's Department of Gerontology and the Longevity Project for a greater Richmond.

## Panel Discussion:

### How the Sausage is Made:

### Eldercare Professionals

2

#### Elmira Pitchford

Elmira Pitchford is an accomplished healthcare professional. She operates her own Training School teaching PCA, DCS, medication training, and other mandatory trainings required by the state (with a 100% state exam pass rate for medication training).

She is a licensed assisted living administrator and nurse for over 55 years as well as a QMHP, paralegal, former state licensing inspector, consultant for three (3) ALFS to maintain their licenses, former VGEC trainer... and so much more!

## Panel Discussion:

### How the Sausage is Made:

### Eldercare Professionals

3

#### Catherine A. McCray

Catherine is currently working as the HR Coordinator and ALF Advisor at Saint Francis Home, a nonprofit Assisted Living Community in the Richmond / Manchester area. She has worked in the long-term care field for 40 years and has held positions across the full spectrum of the continuing care retirement industry.

Whereas, Cathy is a Senior Professional in HR, she is also a Licensed Nursing Home Administrator, Licensed Assisted Living Facility Preceptor, Certified Aging Services Professional, and Certified Non-Profit Manager.

Cathy earned her Bachelor's degree from The College of William and Mary and her Master's from Central Michigan University.





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