



One of us: Stories from two New Zealand rest homes



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ABSTRACT

In this article we explore the ways in which two aged residential care facilities in New Zealand construct and present themselves through the stories told by those who live and work in them. Ethnographic field notes and interviews were analysed using an immersion/crystallization method consistent with a narrative gerontology framework. Woven into residents' stories about their lives in the facility were tales of earlier lives and identities, immigration, occupations, marriage, tragedies and medical emergencies. Care workers, nursing staff and managers talked about vocation, the ethos and values of the institution and the importance that both staff and residents felt a sense of belonging and 'being one of us.' These stories, 'talk into reality' the aged residential care facility as a particular kind of rest home, in which residents feel 'at home'. In addition, as researchers who brought our own stories to the project, we actively contributed to the construction of each institution as a certain kind of facility.

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In this article, we present findings from a research project conducted in two New Zealand (NZ) aged residential care² facilities. Although much has been written on the meaning of stories told by ARC residents (e.g. Gubrium, 1997; Gubrium & Holstein, 1998; Lee, Simpson, & Froggatt, 2012; Moore, Metcalf, & Schow, 2006; Norrick, 2009; Randall & Kenyin, 2001; Webster, 1999), as yet little attention has been paid to the ways in which those living and working in such facilities actively construct these institutions through the stories they tell. Our article adds to what is known by answering the question of how do stories help construct aged residential care facilities as certain kinds of rest homes (NZ colloquialism for ARC facilities)?

There are several methodological approaches used to understand storytelling by older people and the stories themselves. Oral history has long been a key methodology

for capturing the memories of older people as evidence of the past (Bornat, 2001). The 'life review' is another approach for understanding storytelling and draws on Erikson's lifespan developmental theory in which the final psychosocial task of the individual is to come to peace with their life before death (Butler, 1963). According to narrative approaches, storytelling represents an ongoing and continuous construction of self as individuals attempt to link the events across their lifespan into a coherent sequence, where reality is talked or storied into being (Heritage, 1984 cited in Gubrium and Holstein (1995)). Individuals use narratives to construct and present themselves, but narratives are also the vehicle by which others are constructed. To this extent, we are all supporting actors in the narratives of others; we are all knitted into each other's historical constructions (Schapp, 1976 cited in Gergen & Gergen, 1983).

Narrative gerontology has emerged fairly recently as a methodologically eclectic framework that encapsulates the above approaches and provides a lens through which to view and understand the ageing process (de Medeiros, 2014; Kenyon & Randall, 2001). While narrative gerontology did not explicitly

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guide our research design, the social constructionist framework that underlay our research is certainly compatible with the narrative gerontology approach in that common understandings and accepted wisdom arise, are maintained, challenged and changed through the interactions between individuals within communities (de Medeiros, 2014; Guba & Lincoln, 1998; Gubrium & Holstein, 1995; Kenyon & Randall, 1999) and increasingly through processes of globalisation and cosmopolitanisation (Beck, 2002). However, rather than examining the mechanisms by which individuals become aligned with social and institutional discourses through processes of identity construction (Foucault, 1988) (Bourdieu, 1977), narrative gerontologists such as Kenyon and Randall (2001, p. 12) draw attention to the individual's propensity to make themselves up from the 'inside', aligning and re-working past experiences in response to particular audiences. The rest home is a particular kind of audience. Phoenix, Smith, and Sparkes (2010, p. 2) note that we organise our experiences through and into our narratives and stories, and the storytelling is the means by which we assign meaning to our experiences. Kenyon and Randall (1999) claim that we not only have stories, we are the stories. This is particularly so for those who can no longer access long term memories.

Across the approaches of life review, reminiscence and narrative, storytellers generate coherence through the process and the content of stories that are sequential and consequential, and are also dependent on context (Gubrium & Holstein, 1998; Phoenix et al., 2010). The storyteller is not only the author of their narrative, but also an editor, constantly monitoring and revising the emergent storey (Gubrium & Holstein, 1998) in relation to context. This makes it possible to conform with or confirm other stories and plots that develop as one person compares and integrates their storey with someone else's.

Similarly, listeners are not passive receptors; they collaborate in the story, invoking cultural meanings and expectations. Rybash (1999) suggested (following Schacter (1996)) that conscious recollection of personal life events is best conceptualised as a reconstructive process in which traces of an original experience are integrated with and transformed by the cognitive and social processes that operate at the time of retrieval. Individuals engage in private reminiscence, but much, like autobiographical remembering, reminiscing takes place in social situations and settings; and to the degree to which reminiscence occurs in company of other people, it is socially constructed (Randall, Prior, & Skarborn, 2006). Myerhoff (2007, p. 35) calls this "re-remembering" with a deliberate split in the word indicating a struggle toward self-knowledge and integration.

Stories often contain references to artefacts or things which appear as props and symbols. Artefacts carry memories of special events in life and are very evocative. They have been described as totems of identity (Price, Arnould, & Folkman Curasi, 2000). Photographs of deceased family members can reunite the individual with past loved ones through reminiscence (Price et al., 2000). Places, like things, situate narratives and reminiscences and frequently serve as key material and symbolic resources for biographical development. Attachments to home, possessions and community serve as experiential anchors for memories (Cooney, 2011; Kontos, 1998). Similarly, the artefacts of frailty; walkers, commodes and wheelchairs carry symbolic import for the older person as a constant

reminder of their frailty. Personal identities are historically emplaced and illustrate that older people's lives and places are co-constructed and inseparable (Andrews, Kearns, Kontos, & Wilson, 2006).

Regardless of the theoretical and methodological vehicle for storytelling, Randall et al. (2006) remind us that there is no one version of a life story, rather there are countless different versions. Older people in particular illustrate this, given their years of life and their various experiences. The articulation of a limited future and a lengthy past impels the older person toward reminiscence, recalling the memories of past life and events, creating and recreating an identity for presenting to self and to others.

Underpinning the context of our research is the New Zealand cultural norm that places a high value on owning and living independently in one's own home (which in New Zealand is typically a detached house with a yard), reflecting deep societal moral values of independence and autonomy. It also represents ontological security in that home encompasses a set of meanings around permanence and continuity that also affords control and privacy (Robertson & Fitzgerald, 2010). For baby boomers, home ownership represented a central normative component of cultural identity as a New Zealander (Dupuis & Thorns, 1998). In her review of the literature on the dimensions of 'home', Cooney (2011, p. 189) found home defined in terms of "(i) a place of retreat, safety and relaxation, freedom and independence; (ii) a place of privacy, self-expression, familiarity, identity and continuity; and (iii) the centre of family life, togetherness, belonging and connection". These factors contribute to the bonds that older people have with their homes and explain why moving into ARC is viewed as a move of last resort (Cooney, 2011).

In New Zealand, many older people are admitted to ARC following a trauma such as a fall and consequent hospitalisation for injuries. Admission to an ARC is dependent upon an assessment, by a registered professional, of (in)ability to care for oneself (Ministry of Health, 2015). A fall, like dementia, constitutes a key signifier of inability to live independently in one's own home. For many older people, the transition from home to care is frequently sudden and involuntary. It triggers feelings of loss and grief, although the adjustment to care can also result in reduced anxiety and renewed sociality. The transition to care can also be confronting because of compromises to dignity by strangers performing intimate acts such as toileting and showering (Lee et al., 2012). Wiersma and Dupuis (2010) argued that individuals' sense of self can be compromised as they are socialised into the institutional routines of the ARC. It has been suggested that feeling 'at home' within ARC facilities can contribute to residents' quality of life and efforts are made by ARC staff to help new residents 'find home' in their new surroundings (Cooney, 2011).

Methodology

This study was conducted using qualitative methods within a social constructionist framework (Randall & Kenyon, 2004). Qualitative research is particularly useful for gaining insights into the lived world of people as individuals and as social actors enmeshed within social communities (Kvale, 1996; Wolcott, 2002) and to seek insights into how shared meanings and understandings, shared practices and sense of community arise

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