Re-Membering our lives: Aging, narrative, and the arts
A community-based participatory research design proposed for older adults
at Luther Court

by

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Abstract

We are all aging. To be able to live one’s life with a sense of meaning and purpose up to and including the time of our death is a yearning common to most people. However, the realities of aging - the physical, emotional, mental and spiritual challenges that are inherent to the aging process - can provide barriers to the human desire to live life fully until we die. This project proposes a strategy for how a community can support older adults in an intentional way that enables them to live with a sense of well-being and purpose even in the face of frailty, loss and challenge.

The project is set within the particular context of the community of the Luther Court Society, an organization which has provided care, housing and a wide range of services to older adults in the Greater Victoria community since 1979. Looking to the narratives of older adults as fertile ground for extracting meaning that can inform the present and provide a way into a hope-filled future, this project proposes an engagement strategy which can be used to elicit the stories and experiences of older adults. Designed as a community based participatory research framework, the older adults themselves are intended to be part of the research team, seeking to integrate life experience in a way that is life-enhancing. The engagement strategy is grounded in the literature of aging, health and social integration. Servant leadership is examined as a paradigm to look at the role of service in the community and to provide some insight into the relationship between the one serving and the one being served as one of mutuality wherein each serves the other.

Methods of arts-based inquiry are looked to as helpful tools in meeting the objectives of the proposed engagement strategy. The arts engage us not only from an intellectual medium,
but also from a sensory and whole-body experience, and as such embody the potential to evoke response and learning on a variety of levels. In particular, reminiscence theatre is examined as a helpful medium to explore the narratives of the community, and through an interactive theatre methodology, knowledge can be extracted and utilized in further iterations of the engagement strategy as well as to inform practice. Information gained from the engagement strategies can also be utilized in helping the Luther Court Society refine its unique Model of Care, *Life Together*, and to identify volunteer opportunities that capture the interests and skills of the older adults within the community, thereby deepening their engagement in the community in a positive way.

The engagement strategy contributes to the discourse on aging particularly in its methodology, which acknowledges and seeks the critical, indeed primary voice of the older adults themselves and provides a vehicle for them to participate in ways that empower and bring creative response.
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Dedication

To Ann Pellow, Dorothy Salmon, Grace Timp and Elizabeth Newnham,

women who lived long, interesting, courageous and grace-filled lives.

They were mentors for me of aging well, of life lived to the fullest, every drop squeezed out; lives lived in service of others; lives that didn’t give up in the face of incredible obstacles and heartache; lives of people who knew how to love well.

They have embodied the wisdom that informs us that the last great frontier of life to be explored and navigated is the journey within.

Though they have left us, their light still shines brightly.
Chapter 1: Introduction and Context of the Project

Aging is the turning of the wheel, the gradual fulfillment of the life cycle in which receiving matures in giving and living makes dying worthwhile. Aging does not need to be hidden or denied, but can be understood, affirmed, and experienced as a process of growth by which the mystery of life is slowly revealed to us. (Nouwen & Gaffney, 1976, p. 14)

The desire to live a life to its very end, filled with meaning and purpose, is as integral to human experience as breathing. To be able to accomplish those daily tasks that bring a sense of fulfillment, to be able to share our life with people that matter to us, to have a sense of autonomy and self-determination, to feel at home in one’s surroundings and within one’s person, are all yearnings experienced as part of the human journey. However, the realities of aging and the physical, emotional, mental and spiritual challenges that are inherent to the aging process can provide barriers to the human desire to live life fully until we die.

This project develops an engagement strategy which can be used to look at the life of an organization, the Luther Court Society. The purpose of developing this participative engagement strategy is to provide a tool that can be used to support older adults in living with a sense of purpose and joy. This proposed engagement strategy is designed to elicit and honour the narratives of older adults at Luther Court, and to provide a range of opportunities to use those stories in life-enhancing ways, such as by performing them through an interactive theatre process.

Luther Court has been intentional about providing a community wherein people can age-in-place, and can be supported and encouraged to continue to live their lives in congruence with their own values. They do so in a community that offers both private and village spaces, in a place that encourages opportunities for social engagement and in a community that
recognizes that it is in serving others that we find joy and purpose in our own lives. This proposed engagement strategy will seek to understand how those values which support healthy engagement in the community can be further supported. It will also provide a frame of reference for the Luther Court Society, to ensure that the values which are used to form and shape the community have resonance with what the community participants articulate as being life-enhancing. This kind of inquiry is crucial to the Society to ensure that the kind of community that it is engendering is one which actually supports and enhances the life of those who live within the community and that the Society is responsive to those key elements which bring meaning and purpose to the lives of community members.

This project proposes an engagement strategy as to how an intentional community can support older adults in a way that provides a sense of well-being and purpose even in the face of frailty, loss and challenge. Determining what the factors are that create such a climate of support necessarily involves an active engagement with the older adults themselves, with their families and with the staff that provide services. Informed by a community-based participatory research approach, an engagement strategy will be developed wherein the sharing of information, values and life experience opens the possibility of co-learning, which can be utilized to help this organization move forward in fostering a community that helps older adults to stay connected to what gives meaning and purpose to their lives. It is hoped that this proposed engagement strategy will help to elicit and increase both the individual and communal knowledge and insight of the community in a way that helps the organization to move forward in providing those supports, whatever they may be, that help to encourage people to live fully until they die.
Background

The Luther Court Society is a faith-based, not-for-profit organization that provides care, housing, and a range of services to older adults in the Greater Victoria area. It is a community of care that offers complex care services, independent subsidized rental apartments, assisted living, adult day programs and health and wellness programs. It is publicly funded under the Vancouver Island Health Authority, is governed by a volunteer Board of Directors who are elected from the membership of the Luther Court Society, and the Society has been known for excellence and for its innovative programs and services since it opened its doors in 1979. Luther Court has been accredited since 1989 under the auspices of Accreditation Canada. Accreditation Canada is “a not-for-profit independent organization that provides health organizations with an external peer review to assess the quality of their services” (Accreditation Canada, 2011, para 1).

Luther Court has approximately 115 volunteers that serve in a variety of capacities across the organization; of these 115 volunteers, one-third of them live in the community itself. This volunteerism serves the community well, and for the one who is serving, a sense of purposefulness is established. As many of the seniors living in the community have expressed a sense of satisfaction in being able to offer useful service, the question arises of how a broadening of the volunteer opportunities that could involve the community members even more fully, could be envisioned.

Luther Court is home to a multi-dimensional group of people, whose common denominator is that they are older adults and that they find benefit in living in a community setting. The faith-based foundation of the society carries with it the value that each person is of inestimable value and deserves the right to be treated with dignity, respect and compassion.
The organization celebrates diversity as a sign of a Creator whose palette for creation is as vast as the universe. In its 30 year history, the community has welcomed people of a variety of Christian denominations, people of Jewish, Buddhist, Islamic and Sikh backgrounds, as well as those who express no known association with any faith community. The organization is inclusive of people of all ethnic backgrounds, sexual orientations and cultural backgrounds. Intentionality around being an inclusive community means that work is done to help the community see each person as “a unique blend of strengths and needs” (Luther Court, Philosophy Statement, 2010, Appendix B). It means that observances of something like Remembrance Day may very well include veterans who fought on both sides of the conflict in World War II. The event focuses on honouring the dead from all sides, and praying and working for peace. A separate example was when Luther Court welcomed an older transgendered woman into the community in 2000, a journey which changed the organization from the inside out. The community does not try to be homogenous, but rather to be a place of welcome and hospitality where people are free to be themselves.

I am the Executive Director of this organization, a position I have held for the past two and one-half years, though I have been on staff in this organization for 20 years, serving previously as the Director of Pastoral Care and Counselling and then as the Director of Care. As the Executive Director of this organization, I acknowledge the position of privilege this gives me within the organization. Although I am accountable to the Board of Directors and more broadly to the members of the Society, I also recognize that I am in a position where power is exercised with regard to the organization. While this particular report stops at the proposal stage, I am aware that my power must not be utilized in an unjust or coercive manner in the future execution of the research design. As community-based participatory
research acknowledges the equality between researcher and community, it is critical to build into the design, mechanisms to ensure that a collaborative method of inquiry is used in a way that empowers people and does not exert power over people. This will be discussed further in Chapters 3 and 5.

In 2005 the Luther Court Society stood on the threshold of a new adaption of services for the community. The health region had provided funding for a major renovation to enable us to provide complex care services. While these developments were exciting and acted as a catalyst for new horizons and possibilities for the organization, it also presented an opportunity for the organization to taken an inventory of what was unique to the organization – what had led to the success we had enjoyed in terms of being a compassionate presence in the Greater Victoria community, and a community of choice that people wanted to be a part of. As we anticipated change, we wanted to make sure we did not lose the essence of who we were. It was important for us to retrace our steps through our mission statement and vision and philosophy statements. It was important to have a sense of our identity so that we might be intentional about carrying that vision forward with us as we embraced change and prepared to deliver services for the next era in our history. Out of this process was born a model of care which we entitled Life Together.

The Luther Court Model of Care, Life Together, is comprised of five concepts:

- Home
- Ethically based
- Person Centered
- Collaborative Team
- Caring Community
These five concepts are situated within three contexts:

- Physical environment
- Organizational Structure
- Culture

(Luther Court, 2006, Model of Care, Appendices C & D)

The Model of Care provides a framework for key questions to be raised and reflected in the day-to-day operation and life of the community:

- What does it mean to feel at home?
- What does it mean to live in a community wherein ethics are threaded through daily living in a way that is transparent and easily identifiable?
- What does it mean when we place people at the centre of our concern?
- What does it mean to deliver services as a team and who is part of that team?
- What does it mean to live not in isolation, but as a member of a community?

In the examination of these questions what appears in the foreground, are the relationships that exist between the different concepts as well as the importance of intentionality in a clear link between the stated values and philosophy of the organization and the day-to-day work and life of the community.

Luther Court is well established as a respected and inviting community that offers shelter, care and a range of services to older adults. It has developed its unique Model of Care that serves as a framework to draw direct links between its stated mission, values and philosophy and the day to day work and culture of the organization. This model needs to be responsive to the community and reflective of the needs and best interests of those who live in the community and those who partake of its services. In order to truly meet these needs and be
responsive to them, such information must be gathered from those for whom the services are intended – the seniors themselves and their families. To be a community that honours the whole person, involves an understanding of who they are, what their life journey and story contains, the things that carry meaning and purpose for them, and in light of that information, how they can be supported to continue to live in accord with what has shaped their lives and provided a sense of well-being and fulfilment.

As the *Life Together* Model of Care forms the basis for the environmental, organizational and cultural considerations of the organization, one of the purposes of the proposed engagement strategy is to provide further information that can be used to inform, update and provide additional context to the model itself. The model is currently used as a measure against which all practice is evaluated. In order to be intentional about drawing a clear connection between our stated mission and values and our day-to-day practice, we have built the model to serve as a tool for such evaluation to occur. However, the validity of a model, such as the Luther Court Model of Care, *Life Together*, must be able to be borne out as efficacious in the experience of those for whom it is designed to serve. New learning that is derived from the proposed engagement strategy can be used to update and strengthen the model, to provide change and correction, where needed, and to provide an intentional process for community input into the ongoing use of the *Life Together* model in this organization.

**The Community at Luther Court**

Luther Court is a community that is complex in its make-up. Some people that live in the community are totally independent, and are capable of undertaking all the necessary tasks of daily living, including the preparation of their own meals, the running of their household and the management of their own social contacts. Others in the community have profound health
challenges. For example, there is a significant part of the community for whom dementia is a primary diagnosis. Given the diversity within the community, and the attendant different kinds of services that are offered, it is difficult to give everyone equal status in the proposed engagement strategy. However, even those with dementia, have stories to tell – sometimes the same story over and over again. But in that story is a glimpse of what lends meaning and purpose to their lives. Family members are also critical to gathering the narratives of these people and adding their voice as integral to the shared voice of the community.

Ageism and an Aging Population in Canada

There is little doubt that we are an aging society. Desjardins (1995) in looking at Canadian demographic data from 1881 through to projections for 2036, posits that while in 1881 people over the age of 65 comprised less than five percent of the general population, by the year 2036 they will comprise an estimated twenty-five percent of the general population (p. 13). Although population aging is not new, Chappell, Gee, McDonald & Stones (2003) remind us that some time periods have experienced more rapid aging than others. Clearly, the decades to come will experience a large increase in the proportion of the population aged 65 years and over. This increase is a direct result of the aging of the baby boomers – the large cohort of persons born between 1946 and 1963 – who will begin entering traditionally defined old age (i.e., age 65 years) in 2011. Between then and 2027 – when the youngest baby boomers turn age 65 years – the ranks of the older population will grow substantially. (p. 5)
In my many years of working with older adults, I have been able to identify recurring themes that appear in conversation. These themes cluster around feelings of inadequacy and uselessness that older adults often feel. People who have led full and productive lives are thrust into a new phase of life wherein not much is expected of them, little productive work or engagement is offered to them to do, and they are left with a restlessness that can be debilitating. These factors combined with the often crippling multiple losses of the deaths of family and friends, the loss of health and the loss of a way of life that is familiar and comfortable can precipitate profound crises for older adults. So often, older persons will remark that they may as well die because there is nothing productive for them to do; they are taking up space and resources that should be given to a younger person. This is reflective of beliefs and values commonly held in the larger society.

In western society ageism is a very present reality and creates challenges for older adults in that it presents blocks to them being perceived as a valued and indispensible part of society. In an Australian study published in the Applied Journal of Gerontology, Jocelyn Angus and Patricia Reeve postulate that

Ageism has been called the ultimate prejudice, the last discrimination, and the cruellest rejection. In our global communities, ageism forms a powerful part of our social and cultural environment in which people construct their aging. It is a concept that impacts on the lives of older and younger people by obscuring understanding of the aging process, reinforcing structural inequalities, and shaping patterns of behaviour in older people that are inimical to their interests.
Gerontologists have argued strongly that negative and often ageist attitudes may be at the root of the worst problems that can affect older people. (Angus & Reeve, 2006, p. 139)

In a study of contemporary portrayals of seniors in the Globe and Mail, which purports to be Canada’s national newspaper, Rozanova & Northcott (2006) argue that ageism consists of both negative and positive stereo-types and that ageism can involve both “inter-generational and intra-generational comparisons” (p. 382). Although Rozanova & Northcott found that seniors were displayed as a diverse group of people in terms of their health statuses, abilities and needs, they also found that seniors were consistently portrayed as “different from and unequal to younger adults” and furthermore that “some groups of seniors were portrayed as different from and inferior to other older adults” (p. 382). Rozanova & Northcott conclude that there is a duality in the ways older adults and issues pertaining to them are portrayed in the media. Certainly negative stereotypes abound. There is also an attempt to counteract this with positive messages about aging. However, as the successful aging messages highlight the importance of the personal choices that seniors make in relation to their well-being, Rozanova & Northcott point out there is a danger that this will lead to creating new stereotypes about aging well that may marginalize those older adults who do not match the new expectations. While the successful aging theme aims at empowering seniors by highlighting the importance of their personal choices to their well-being, it may divert attention from the need for society to be supportive of older adults. As well, at present, when the topic of society’s support
system for the elderly is at issue, it gets caught up in the apocalyptic demography/inter-generational conflict theme, where seniors are blamed for escalating social costs and younger people are presented as victims of an aging society. (p.384)

Influenced by the prevailing cultural norms with respect to aging and the older person, it is common for people within our western culture to fail to recognize that older persons are capable of making a contribution. When they come to reside in assisted living or long term care facilities, services are offered, and everything is “taken care of”. However, it is also customary in this circumstance that little is left for older adults to do either for themselves or for others. It is not unusual therefore, that they could feel useless or a burden and would rather just get on with it and die.

**Value and Importance of the Project**

Nouwen and Gaffney (1974) in their classic book, *Aging: The Fulfillment of Life,* recount an old Balinese legend that relates to the loss of the elderly voice:

> It is said that once upon a time the people of a remote mountain village used to sacrifice and eat their old men. A day came when there was not a single old man left, and the traditions were lost. They wanted to build a great house for the meetings of the assembly, but when they came to look at the tree-trunks that had been cut for that purpose no one could tell the top from the bottom. If the timber were placed the wrong way up, it would set

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1This quote is an invitation to consider the wisdom of our elders as essential to making sense of the world. The quote is specific in its reference to men. However, this writer would broaden its meaning to include the wisdom of women. Certainly we are enriched most fully when we allow the voices of both men and women to be heard, honoured and valued.
off a series of disasters. A young man said that if they promised never to eat the old men anymore, he would be able to find a solution. They promised. He brought his grandfather, whom he had hidden; and the old man taught the community to tell top from bottom. (p. 23)

In a culture such as ours, where we are prone to disparage our elders, we run the risk of losing our way, and not being able to tell the top from the bottom. It is my hope that this proposed engagement strategy will benefit older adults by learning and re-learning ways to integrate them into a supportive community and support them in their quest to live their days filled with meaning and purpose in accord with their own life values and history. It is also my hope that learning may extend beyond the elders – that the stories that are shared and reflected upon may contain truth that helps us to understand life in a deeper and more significant way. Perhaps if we listen to the wisdom of our elders, we will not only know the top from the bottom, but we will appreciate that the greatest meaning in life is not lost when we have lost our youth with its attendant strength, but is hidden in the depths of each individual, in the core of what makes us human. It is a treasure waiting to be discovered.

**Context for the Engagement Strategy**

This proposed engagement strategy seeks to engage the community at Luther Court in drawing out the stories of those who form the community, of finding the unique and the common threads that run through those stories and to use that learning in ways that help people to stay connected to their own sources of meaning and purpose. Furthermore, the learning may provide insight as to what kinds of opportunities for engagement need to be available to all
members of the community, in order that they may participate in meaningful activities of daily life in a way that enhances and supports healthy aging and living.

This project is a proposal for a community-based participatory engagement strategy, which draws from the field of Community-Based Participatory Research (CBPR) and its affiliates (e.g. Participatory Research, Action Research, and so on). CBPR is an over-arching approach that can employ a wide variety of research methods. However, whatever method is employed it must be participatory in nature: it must foster co-learning amongst participants, as much as possible, it must encourage equal participation between researchers and members of the community. It also promotes development and capacity building, it enables participants to increase control in their own lives and it is balanced between research and action (Minkler, 2004, p. 685).

The methodological framing and specific methods used in this study will be covered in more depth in Chapter Three. This proposed engagement strategy is grounded in academic study in two primary areas of focus: in the area of aging, health and social engagement, and in the area of servant leadership. These concepts will be discussed in Chapter 2.

Summary

In this chapter I have identified the community in which I am privileged to serve as Executive Director, the Luther Court Society, and the particular context out of which this proposed engagement strategy arises. The background of this organization is provided here, as well as some key points, including how the Luther Court Society is organized around its own uniquely-developed Model of Care, to assist the Society in fulfilling its mandate of providing compassionate care and services to older adults in Victoria, B.C. This chapter names the purpose of this project, which is to develop a proposal for an engagement strategy that will
involve the community in a journey of discovery and learning concerning those things that bring a sense of fulfillment and joy to life. The engagement strategy is designed to enable older adults to make connections to their own life stories, and to use those stories as a springboard for connecting past experience with present reality in a way that provides a way forward for a hope-filled future. This chapter has briefly provided a synopsis of some of the particular challenges of aging and the realities of ageism prevalent in western society. However, it also lifts up a vision of a vital and healthy view of aging that sees old age as the culmination of a life well-lived and sets a task of integration of that life as one of the primary tasks of the older adult.

The information that may be gathered from the proposed engagement strategy could have the potential not only to elicit the narratives that are intimately tied to life-meaning, but also to provide clues for how the older adult may more fully engage in the community in terms of social and/or service-related opportunities. This further engagement may also enhance the quality of life both for individuals within the community and collectively, for the community as a whole. The information that arises from this proposed community engagement can also be used to inform and update the Luther Court Model of Care, Life Together, in order that the organization’s underlying structure is reflective of and responsive to the needs, dreams, values and collective wisdom of those who benefit most directly from its implementation.

We now turn out attention to a review of the literature that supports and provides a foundation for this enquiry. In Chapter 2 we will look particularly at the philosophy of Servant Leadership and at the research concerning aging, health and social engagement as a basis and launching point for developing an engagement strategy.
Chapter Two: Theoretical Framework

This proposed engagement strategy is built upon the theoretical framework established in two areas of inquiry: aging, health and social engagement, which within its bounds also considers spirituality and volunteerism as it pertains to older adults, and secondly, servant leadership and its potential for engagement of not only staff in our organization, but the older adults themselves. In this chapter I shall turn to an examination of the research that has been conducted in these areas to establish a framework within which the proposed engagement strategy can be constructed.

Aging, Health, and Social Engagement

A significant body of literature exists that explores the dynamic between successful aging, including longevity of life, and its relationship to social connectedness and/or isolation. Within this body of literature is research on the role of spirituality as it relates to successful aging. For the purposes of this proposed engagement strategy, I will also explore the research surrounding volunteerism amongst the elderly.

Cornwell and Waite (2009) conclude that “social disconnectedness is associated with worse physical health, regardless of whether it prompts feelings of loneliness or a perceived lack of social support...The perception that one lacks social resources may take a toll on physical health” (p. 43). Drawing on information established by both sociologists with regard to perceived social support (Blazer, 1982; Krause, 1987 & Ensel, 1999, as cited in Cornwell & Waite) and by psychologists with regard to a link between loneliness and worse health, including cardio-vascular disease, inflammation and depression (Cacioppo et al., 2006,
Hawkley et al., 2006, Steptoe et al., 2004, as cited in Cornwell & Waite, Cornwell & Waite posit a direct correlation between social isolation and increased risk for older adults (p. 32).

The losses that are associated with aging can severely impair the ability to maintain social cohesion. An older person may experience the death of family and close friends. Frail physical health may limit their ability to enter into the public arena. Multiple losses may impact not only an older person’s ability to maintain social connections, but also may have a debilitating effect on the older person’s desire to engage in a meaningful way with others. Klumb & Maier (2007) suggest that older adults, who are involved in a broad assortment of social activities ranging from conversation to playing board games, can create a sense of belonging that can be linked to improved outcomes for physical health. Glass, Mendes de Leon, Marottoli & Berkman (1999) argue that although physical activity has been linked for a long time to reduced mortality rates, the benefits of activities that require little or no physical activity (visiting, attendance at church or cultural events etc.) “confer survival benefits through psychosocial pathways” (p. 478). Chappell et al., (2003) remind us that “increasingly research is investigating the biological pathways through which social factors are related to health” (p. 273) and that research has clearly established that there is a positive relationship between social support and well being. “Social support is directly related to our well being; those with more social support have increased well being. Social support is also important for our well being during times of stress. Those with social support during times of stress have better well-being than those without social support” (Chappell et al., 2003, p. 371).

As the importance of social integration with its direct correlation to positive health outcomes has been demonstrated, the focus turns to how do we enable that integration to occur and to be supported in the lives of older adults? At the institutional or macro level, ageism may
hinder older adults from engaging in what they perceive as meaningful activity. For example, very few employers view older adults as a potential pool of employees, even when the older adults are eager to participate in the workforce (McCann & Giles, 2002, as cited in de Jong Giervald & Hagestad, 2006). Similarly, access to volunteer work, boards of organizations and other like endeavours, may be restricted by age categories. Exclusion from these activities can lead to a deflation not only of social integration for older adults, but also can engender a sense of uselessness and loss of productivity.

In both traditional and modern societies, age integration is needed if individuals of all ages are to be ‘productive’ participants in society. Note that productive is used not only in an economic sense here but also in the broader sense of contributing to family, organizations, or local communities. (de Jong Gierveld & Hagestad, 2006, p. 632)

At an individual level, losses of integration are endemic to the aging process. Children grow up and are not living in the familial home, and the parenting role changes. Spouses die and as a result the remaining spouse loses their ready social contact and support. As people retire, the usual contacts in the workplace diminish. Older adults begin to outlive many of their friends, with whom they may have established life-long relationships. Though these losses are significant, and should not be overlooked, it is also true, that many older adults enter into new relationships and therefore into new opportunities for social integration (de Jong Gierveld, 2004; Stevens, 2001).

A divergence of opinion can be evidenced with regard to older adults and social isolation. Early research depicted older age as a time of loneliness and isolation from any
meaningful roles, indeed a voluntary social disengagement (Cumming & Henry, 1961). This view has been challenged by subsequent scholars who disregard the notion of voluntary disengagement, and instead put forth the idea of older age as a time when older adults struggle with their identity, seeking to maintain their roles and activity in the face of multiple losses and life challenges (Moen, Dempster-McClain & Williams, 1992; Atchley, 1989). Current research demonstrates a move away from considerations of social integration that focuses on roles and activities and instead looks at network-oriented study (Cornwell, Laumann & Schumm, 2008).

Fast, Charchuk, Keating, Dosman & Moran (2006), in their *Report to Social Development Canada, Knowledge and Research Directorate* on the contributions of seniors in Canada demonstrate a changing perception with regard to the place of seniors in Canadian society. In this report which was commissioned in response to the International Association on Gerontology’s *Research Agenda for the 21st Century*, (Valencia Forum, 2002), findings of the importance of social networks and volunteering in connection to positive health outcomes are discussed.

We conclude that seniors are in fact increasingly contributing to society in diverse and often hidden ways and their contributions do not end when they are no longer paid employees. Rather than seniors becoming dependent consumers of society’s resources, they are experiencing increased longevity that is filled with vitality, physical health and productivity. (p. 4)

Haines & Henderson (2002) using data from a longitudinal study of the social networks and social support transactions of older adults in a community in Alberta, examine the nature of relationships within the social networks that surround the older adults. Social networks were
We consider five dimensions of interpersonal social network
connectedness (egocentric network size, volume of social
interaction with and closeness to network members, and network
composition and density), as well as four dimensions of
integration in the community (frequency of neighbourly
socializing, religious participation, volunteering, and organized
group involvement), that researchers consider crucial for healthy
aging. We also consider the potential roles of health and life-
course factors such as retirement and bereavement, in the
associations we analyze. (p. 186)
Cornwell, Laumann & Schumm conclude that there is no apparent correlation between old age and network size, closeness to network members and number of non-primary group ties. However, they did find a positive correlation between old age and the frequency of socializing with neighbours, religious participation, and volunteering (p. 199-200). Citing the work of Putnam (2000) and Baltes & Castensen (1996), they further conclude that adults who face the realities of irreversible changes to their close social network which are not easily replaced, turn their focus instead to civic involvements and volunteerism as “an effort to regain control over their social environment” (p. 200). The research presents some interesting questions to ponder.

If indeed, as Cornwell, Laumann & Schumm (2008) suggest, longevity of life is not tied to the depth or length of relationships, the size of the network circle or the number of non-primary group ties, but can be tied to the frequency of socialization, religious participation, (which one could posit is fulfilling the task of meeting spiritual needs), and the act of volunteering, further investigation of some of these factors of positive correlation is pertinent to this proposed engagement strategy.

As I reflect on my twenty years of experience working with older adults, including several centenarians, I can only recall one person who reached the age of 100 with a spouse yet living. Some of the very old had children still living, but some had outlived their children. Very few had siblings still alive, and many of them had out-lived their long-term friends. However, without fail, each of them was still socially engaged. They sought the company of others, were interested in and engaged in the lives of others, and were willing to self-disclose the stories of their own life journey in positive ways that built social connection and cohesion with others. The use of narrative or life-review is a critical piece of this observation, and a fuller examination of narrative inquiry as a method for positive engagement in later life will be
discussed in Chapter 3. It is perhaps self-evident that we cannot travel to the very bounds of old age physically bringing with us all the significant people who have helped to shape our lives. Yet we may carry the meaning and purpose attached to those relationships with us to the end of our days, sheltered in the stories and experiences that are uniquely the property of each person. One of the marks of aging is the multiple losses that attend the way. Clearly the ability to adapt to those changes is a needed skill for successful aging (Utz, Carr, Nesse & Wortman, 2002). It is not that “just anybody will do” in terms of social engagement, but rather developing a network or system wherein the person is able to perceive a continuity with life patterns already experienced as well as a stability in social relations. Having a story to tell and someone to listen and help to make sense of that story, to preserve the key elements of that story that hold importance for the present and for a hope-filled future is a critical factor.

**Spirituality**

As Cornwell, Laumann & Schumm (2008) have identified religious participation as one marker with positive correlation to longevity of life, we turn our attention to a brief examination of spirituality where it may be relevant to this engagement strategy.

Spirituality is experienced as a capacity for transcending one’s working realities, (physical, sensory, rational and philosophical), in order to love and be loved within one’s communities, to give meaning to existence and to cope with the exigencies of life.

(Hay, 1989, p. 25)

Atchley (2009) offers a further complementary descriptor of spirituality:

Spirituality...refers to an inner experiential region of human life.

Spiritual experience can occur at many levels: physical,
emotional, cognitive, and transcendent. Spirituality is a quality that can infuse experience in a wide variety of settings. Spiritual experience can be both transcendent and immanent. It can be both an experience of transcending worldly concerns as well as an intense present-moment perception that the ground of all being permeates things. The essence of fully developed spirituality is an intense aliveness and deep sense of understanding that one intuitively comprehends as having come from a direct, internal link with that mysterious principle that connects all aspects of the universe. As fully awakened spiritual beings, we feel our interconnectedness. (p. 13)

Although spirituality is difficult to define, and due to its broad and all-encompassing reality, any definition of spirituality may in fact limit it; nevertheless, it is evident that all humans have spiritual needs and that spirituality is as much a part of being human as is the intellectual, emotional or social realities of humanness (Highfield & Cason, 1983). Religious expression falls within the realm of spirituality, but is not definitive of spirituality. That is to say, many people do not exhibit a need for religious expression, and at the same time, express a need for spiritual expression. And conversely, some people express their spirituality in religious terms or association. Both realities are contained within the broad span of spirituality. Although there is a considerable amount of research that validates the findings of Cornwell, Laumann & Schumm, in indicating that there is a correlation between longevity of life and religious participation, (see Benamins, 2004; Koenig, McCullough, & Larson, 2001), there appears to be relatively little study of the link between religious participation and the meeting
of spiritual needs, and is an area that deserves further examination. The question to be raised is: does the participation of older adults in religious activities provide an outlet for spiritual expression that has a positive effect on the longevity of life? And a related question for those who do not participate in religious activities might be, is there adequate opportunity afforded to these people for spiritual expression, in a way that is consonant with their own values? As western society moves into the post-Christian era, (Hall, 1996), these questions may become increasingly salient.

Robert Wuthnow (1998) identifies a shift in the United States since the 1950’s from a religion-centered “spirituality of dwelling” toward a person-centered “spirituality of seeking” and more recently toward a “spirituality of practice” (p. 27 & 168). His premise is that most people balance their lives between dwelling and seeking – liking the security of dwelling and also the adventure of seeking. However he also identifies the more intensive “practice” of nurturing spirituality, which involves an ongoing commitment to spiritual practices which when exercised over time create habits of mind and being that are useful in affixing meaning and purpose to life. Atchley (2009), discusses how spirituality conceived in this open-systems view,

kindles itself within human beings, how people develop their capacity for spiritual experience, how various aspects of the phenomenal world stimulate a human concern with the spiritual, how spirituality influences the development of identity and self, and how years of spiritual journeying affect an individual’s ways of being in the social world – especially through lifestyles and compassionate service to others. Millions of aging people in
America, perhaps a billion or more throughout the world are aiming to live a more integrated spiritual life, one in which spirituality does not have to be reserved for one or two relatively marginal compartments of life but can flourish as a centerpiece of values and behaviour. (p. 147)

As people grasp the importance of spirituality as an integral part of daily life, meaning and purpose is discovered in an “inside-out” process wherein people extract the meaning as it has grown and taken root in their own lives, as opposed to an “outside-in” process where meaning is derived from conforming to a religious culture. And here is where the issue of authenticity comes into play. In order for people to express a sense of meaning and purpose in what they are experiencing, it must contain an “existential authenticity” (Atchley, 2009, p. 148), true to what has shaped and informed their growth as persons, true to their journey of spiritual seeking and practice.

It is interesting in this context, the importance that service to others plays in terms of living out one’s spirituality. And therefore, little surprise, that Cornwell, Laumann & Schumm (2008) also cite volunteerism as another marker with positive correlation to longevity of life. Highfield & Cason (1983) have identified four spiritual needs as having broad application in their study of recognizing spiritual needs in the care of seriously-ill patients. These needs are identified as:

1. The need for meaning and purpose in life
2. The need to give love
3. The need to receive love
4. The need for hope and creativity (p. 188)
The act of giving to others, as evidenced in volunteering may indeed be one means by which older adults continue to find avenues to meet the spiritual needs identified by Highfield & Cason. And conversely, we can posit the reverse, which is the personal devastation that can attend an older person who no longer has any avenue for meaningful service to others.

**Volunteerism and Aging**

If volunteerism is, then, another marker related to life-satisfaction and inversely related to morbidity rates, it is worthy of examination in the context of this proposed engagement strategy.

Volunteer work is widely believed to be beneficial, not only to the one receiving the service, but also to the one rendering the service (Thoits & Hewitt, 2001; Chappell et al., 2003). As public funding for social services has decreased in Canada, there has been a devolution of programs previously provided by the government to the voluntary sector, thus at one and the same time producing a greater pressure upon and opportunity for the volunteer sector (Chappell et al., p. 355).

In 1997 a workshop was held at the University of Victoria entitled “Designing meaningful new volunteer roles for retired persons.” The positive benefits of seniors giving of their services in volunteer work, as discussed at this workshop are outlined by Hadley:

Themes of self-worth and the common good have emerged as central to today’s discussion. Volunteerism, many have observed, has little to do with being a “do-gooder.” It is about valuing the person and increasing the value of social and human resources; it is about self-esteem, freely sharing one’s talent and wisdom. It is about being valued, not paid; it is about
empowerment, growth, and creativity; it is about enhancing the community’s quality of life. It is also about having fun in the process...the third stage or “Troisième âge” of human development...is a time when we can give back to society the lessons, the wisdom and resources that we have derived throughout our long and productive lives...this “Troisième âge” is a special period when we can deepen our wisdom and personal sense of spiritual identity. Whatever emphasis each of us might place in this stage of life, our full engagement implies an enhancement of the common good. (Hadley, 1998, as cited in Chappell et al., p. 355-6)

Chappell et al., also cite a number of studies (Aquino et al., 1996; Hunter & Linn, 1980; Caro & Bass, 1997; Hirdes & Forbes, 1993) that provide empirical evidence of the positive effects of volunteering upon the one who renders the service. Such benefits include life satisfaction, social support, a stronger will to live, fewer symptoms of depression, anxiety and somatisation, and improved general health. There is debate in the literature as to the causality of the evidence; that is to say, does volunteering sustain and enhance well-being, or do those who are generally in better health and are more satisfied in their life, volunteer (Thoits & Hewitt, 2001)? Most researchers concede that there is some selective process at play, either self-selection or social selection (Thoits & Hewitt, 2001; Chappell et al., 2003; Barlow & Hainsworth, 2001), although that does not suggest that the presence of some elements of selection falsify the reports of improved health and life-satisfaction outcomes. “Selectivity does not mean that the results are
false; it means that volunteering is beneficial for certain types of people, not necessarily for everyone” (Chappell et al., p. 359).

If volunteerism, then, can be linked to indications of self-satisfaction, happiness, self-esteem, lower rates of depression, a sense of control and overall good health, Thoits & Hewitt (2001) ask the question as to what are the mechanisms that produce such positive outcomes. And in answering that question, they draw attention to several factors: the importance of feeling needed, that one matters (citing Rosenberg & McCulloch, 1981); the importance of role-identity – that volunteering in providing a role identity enhances meaning and purpose in life (citing Thoits, 1992); the instrumental and socioemotional rewards that spring from service-giving (citing Smith, 1981). Thoits & Hewitt suggest that “doing volunteer work is less important for well-being than the particular conditions of the work perhaps that is done (for example, the work provides opportunities for self-direction and autonomy, the work is non-routine and challenging, and so forth)” (p. 128).

Young & Glasgow (1998) posit that formal voluntary participation in an organization can be proven to have health benefits. Within the scope of their research they look at seven longitudinal studies which examine formal volunteer participation in organizations and correlate its relationship to morbidity rates. All but one of the seven studies were controlled for initial health status. In all seven studies, a positive relationship could be established between volunteer participation and positive health outcomes.

With seemingly incontrovertible evidence that there is a positive relationship between volunteer activity among older adults and improved health and well-being outcomes, it seems prudent that the proposed engagement strategy include as part of its focus, a means to investigate what would foster a greater degree of volunteerism amongst those who make their
home at Luther Court, and furthermore, if particular kinds of volunteer activity may be more beneficial than others.

Having identified service as an area that holds many possibilities for life enhancement for older adults, I now turn attention to an examination of service itself. In particular, the body of literature that surrounds the philosophy of servant leadership will be explored, in order to identify markers that may assist in engaging older adults in meaningful acts of service and engagement in the community.

**Servant Leadership**

Robert Greenleaf (1977) in his seminal essay, *The Servant as Leader*, advances the following thesis:

The servant-leader *is* servant first. It begins with the natural feeling that one wants to serve, to serve first. Then conscious choice brings one to aspire to lead. That person is sharply different from one who is *leader* first, perhaps because of the need to assuage an unusual power drive or to acquire material possessions. For such it will be a later choice to serve - after leadership is established. The leader-first and the servant-first are two extreme types. Between them there are shadings and blends that are part of the infinite variety of human nature.

The difference manifests itself in the care taken by the servant-first to make sure that other people’s highest priority needs are being served. The best test, and difficult to administer, is: Do those served grow as persons? Do they, *while being*
served, become healthier, wiser, freer, more autonomous, more likely themselves to become servants? And, what is the effect on the least privileged in society; will they benefit, or, at least, not be further deprived? (p.13-14)

Greenleaf spent most of his career working for the corporation of AT&T in the field of management, research, development, and education. Through his observations in that capacity, and upon his retirement, as he engaged in consulting for universities and colleges during the campus turbulence of the 1960’s, he began to elucidate a philosophy of leadership that was different from conventional transactional kinds of leadership, prevalent at the time. Rooted in spiritual values, Greenleaf sought to create a sense of hope and purpose in difficult times. Greenleaf has spawned a movement which continues to show marked growth, as research and practice demonstrate the benefits of this kind of leadership (Greenleaf, 1977, Greenleaf Center for Servant Leadership).

Larry Spears (1998), who for many years was the Executive Director of the Greenleaf Center for Servant Leadership, has identified ten characteristics that are indicative of servant leadership. Those characteristics are:

- Listening
- Empathy
- Healing
- Awareness
- Persuasion
- Conceptualization
- Foresight
• Stewardship
• Commitment to the growth of others
• Building community

As these characteristics suggest, servant leadership is concerned with the nature of relationships in the life and work of an organization. People work together to effect common goals. Leadership involves the sharing of ideas and responsibilities, and is a consensual task (Sipe and Frick, 2009; Reinke, 2004). It embraces the sense that service is integral to human existence and is therefore emphasized in the teachings of all the great world religions. “The satisfaction that comes from service has been recognized throughout the world. Serving others is a fundamental, universal human value. It is emphasized in the teachings of the world’s great religions, as well as statements by many respected thinkers and leaders (Keith, 2008, p 2). Greenleaf has taken values that have long been honoured in all of the great spiritual traditions of the world, and has translated those values into a paradigm that can be used in businesses, schools, universities, organizations, health care settings, etc. Keith extracts the words of well-respected leaders in the 20th century to provide a further grounding for the value of service:

Albert Schweitzer said: “The purpose of human life is to serve and to show compassion and the will to help others.” Martin Luther King Jr. said: “Life’s most persistent and urgent question is: What are you doing for others?” Rabindranath Tagore, the Nobel-Prize winning Indian poet, said, “I awoke and saw that life was service. I acted and behold, service was joy.” (p. 3)

The Luther Court Society has already begun to investigate and implement some of the concepts of servant leadership both within its board and staff components. However, it is my
intent in looking at servant leadership in this proposed engagement strategy to ascertain its usefulness not only for board and staff, but for the older adults themselves, as a construct that may inform and enrich their participation in the community. What are the possibilities for service that can be found within the community and what interest is there on the part of the community to engage in such service? Furthermore is the community as a whole served when the principles of servant leadership are encouraged for all?

In his essay, *The Institution as Servant*, Greenleaf begins with the following thesis: “Caring for persons, the more able and the less able serving each other, is the rock upon which a good society is built” (Greenleaf, 1977, p. 49). Interestingly enough, although a wide body of research is extant with regard to servant leadership as a guiding principle in business (DePree, 1987; Covey, 1991; Senge, 1990; Bennis, 1994; Blanchard & Hodges, 2003), and a considerable body of literature also exists with regard to the implementation of servant leadership in schools (Sergiovanni, 1992, 1994; Fullan, 2003; Goodlad, Mantle-Bromley & Goodlad, 2004), there is less written about servant leadership as it applies to working with vulnerable persons, or with regard to volunteer organizations. There has been considerable research on how those in positions of authority may best utilize the principles of servant leadership, but there has been far less focus to-date, on Greenleaf’s early premise, which concerns the able and the less able serving each other. This reciprocity of engagement is pertinent to this proposed study, and bears further investigation. Is there a measure of consent in the act of being served? That is to say, is there a sense that both the one serving and the one being served are mutually committed to the interaction between them, in a way that contributes to the growth of the other and not to an exercise of power over the other? And is the one who is serving open to learning from the one they are serving? Are all concerned in the act of service,
in Greenleaf’s words, “becoming healthier, wiser, freer, more autonomous, more likely
themselves to become servants” (p. 13-14)? Keith (2008) states that, “The best leaders are
invisible. That is why, when great deeds are done, the people have a sense of ownership and
accomplishment” (p. 8).

There has been some attention on the leadership-followership continuum within the
servant leadership literature. Within this continuum is the understanding that leadership is
shared and that leaders need to be aware of this continuum within their organizations so that
they understand when they need to lead and when they need to step back and allow others to
lead (van Dierendonck, 2010). Some of the earliest work in looking at followership was done
by Sergiovanni (1992) in his book, *Moral Leadership*, which is focused on building a theory of
school leadership. Sergiovanni begins his treatise by citing Diana Lam, “Leadership belongs to
everyone....Our role is to cultivate the leadership potential of every single employee, student,
and parent in our school system” (Lam, 1990, as cited in Sergiovanni, 1992, p. 1). Sergiovanni
builds upon this premise by elucidating a model of leadership that does not place any particular
person or persons at the apex, but rather ideas, and vision and a sense of shared purpose.
Speaking of the principle of followership within the school context, Sergiovanni writes,

> When followership and leadership are joined, the traditional
> hierarchy of the school is upset. It changes from a fixed form,
> with superintendents and principals at the top and teachers and
> students at the bottom, to one that is in flux. The only constant is
> that neither superintendents and principals nor teachers and
> students are at the apex; that position is reserved for the ideas,
> values, and commitments at the heart of followership. Further, a
transformation takes place, and emphasis shifts from bureaucratic, psychological, and technical rational authority to professional and moral authority. As a result, hierarchical position and personality are not enough to earn one the mantle of leader. Instead, it comes through one’s demonstrated devotion and success as a follower. The true leader is the one who follows first. (p. 72)

Nurturing an atmosphere, in which ideas and a shared purpose are at the centre, is not something that happens quickly or on the basis of a short campaign. It requires commitment over the long-term to a common vision, it calls for education and ongoing dialogue concerning the vision, and is attended by careful listening, persuasion, foresight, conceptualization, indeed many of the characteristics that Spears (1998) has identified as the markers of servant leadership.

The framework of servant leadership will be important to the proposed engagement strategy, in that it provides a framework for many of the essential tasks of the strategy – good listening, concern for the well-being of others, healing, the recognition of the need for meaning and purpose, building community, and so on. It will be best utilized if it is understood to encompass the whole community, and is not just a set of principles, albeit worthy ones, for those who hold positions of power in the community by virtue of their roles. If this proposed engagement strategy is truly to be one of community-based participation, then it follows that there needs to be a recognition of ownership and input on a variety of levels, as people are able. Sergiovanni, again speaking within the context of schools, speaks to this very point:
When practicing servant leadership, the leader is often tempted by personal enthusiasm and commitment to define the needs of those to be served. There is, of course, a place for this approach in schools; sometimes students, parents, and teachers are not ready or able to define their own needs. But, over the long haul, as Greenleaf maintains, it is best to let those who will be served define their own needs in their own way. Servant leadership is more easily provided if the leader understands that serving others is important but that the most important thing is to serve the values and ideas that help shape the school as a covenantal community. In this sense all the members of a community share the burden of servant leadership. (p. 125)

“People learn best in community, when they are engaged with one another, when everyone is both student and teacher, expert and apprentice, in a rich exchange of experiences and learning” (Wheatley, 2007, p. 173). As far as servant leadership provides a helpful construct for supporting a culture wherein Wheatley’s observation is realized, it is beneficial to this proposed engagement strategy, and to the community at Luther Court.

**Summary**

In this chapter I have examined the literature concerning aging and social engagement with evidence demonstrating that three factors could be shown to have a positive influence upon longevity of life: the frequency of visits with neighbours, religious participation and volunteerism. In this context an examination of research concerning spirituality and volunteerism as these concepts pertain to older adults, was undertaken. And finally, the
philosophy of servant leadership was considered with a view to examine its usefulness within the context of the proposed engagement strategy.

In the next chapter, I will discuss the methodological foundations upon which the proposed engagement strategy will be based.
Chapter Three: Methodology

This project sets out to create an engagement strategy specifically designed for the Luther Court community. As stated in the introduction, the project is undertaken with the express purpose of supporting and engaging the older adults within that community in a process that has the potential to enhance their day-to-day living. This process will be designed to elicit narrative, stories that are like connective tissue linking present reality with past experience in a way that may add meaning and purpose to the lives of participants, and potentially draw them more deeply into the life of the community itself in a beneficial way. The stories, which emerge from the community, are the narratives of the seniors themselves and as such are a basis for “retrospective meaning-making” (Chase, 2008, p. 64). Luther Court has been intentional about naming a Model of Care which places the resident at the centre, which names the immediate environment as a home and not as an institution, which places a strong emphasis on ethical practice, which values the importance of a strong, collaborative team and which lifts up the value of living in community as life-enhancing. Given these values, I am seeking through this engagement strategy to provide a means to more fully realize the values which the Model puts forward and to increase the knowledge base of the organization by setting out a community-based participatory research design where co-learning and the creation of new knowledge may be engendered.

In this chapter on methodology, I will examine the overall structure of a community-based participatory design. Within the CBPR context, narrative inquiry and arts-based inquiry will be explored as useful agents in engaging the community in learning together about what sustains and supports the search for meaning and a sense of well-being in the later years of life.
As the community engages in learning more about each other through the sharing of narratives, they may also discover ways in which they can use that knowledge to deepen their participation in the community. As the life journey of the elders is more fully known, there may be ways to utilize that knowledge in offering participation opportunities in the community – opportunities for meaningful work in the service of others, as the community discerns together how to celebrate and make useful the gifts and interests that each bring to the community. In this arts-based inquiry, reminiscence theatre techniques will be utilized. The engagement strategy will also be open-ended to allow the possibility of other artistic forms to be at the disposal of the community, in service of eliciting, telling and making use of the stories of our lives in life-giving ways.

**Community-Based Participatory Research**

Community-Based Participatory Research (CBPR) is a process for the inclusion of community members, organizational representatives and researchers in all aspects of the research process (Israel, Schultz, Parker, Becker, Allen & Guzman, 2003). It is built on the premise that what needs to be known comes from the community itself and the community exercises control over the research process. Hall, one of the early proponents of CBPR, in his article, *In from the cold: Reflections on participatory research 1970-2005* (2005), talks about the evolution of CBPR and describes it as “the research choice of many of the social movement interventions of the past 20 years” (p.2). He goes on to describe how this type of research, which once occurred only at the fringes, has become accepted in universities around the world as a teaching subject and as a methodology for scholars, including graduate students. However, despite its growing acceptance in academic circles, it is still firmly rooted in the particularity of communities and must, by design, be directed by such communities.
CBPR honours the concept that knowledge is created in a variety of ways and that there are different ways of knowing. Hall (2005) states that:

Participatory research is a proposal for action that focuses on transformed understandings of the creation of knowledge among human beings. Our discourse looks at context, issues of social identity, webs of knowledge, power and such seeking new forms of knowledge construction from places outside the walls of power and dominance. We think that at times we have found new ways to co-create knowledge. (p. 21)

Israel, Schultz, Parker & Becker (1998), posit that a “fundamental characteristic of community-based research…is the emphasis on the participation and influence of non-academic researchers in the process of creating knowledge” (p. 177).

Paulo Freire, the Brazilian intellectual and educator, was invited to Tanzania to participate in a symposium concerning research methods. Speaking within the context of education in Tanzania Freire states:

I think that adult education in Tanzania should have as one of its main tasks to invite people to believe in themselves. It should invite people to believe that they have knowledge. The people must be challenged to discover their historical existence through the critical analysis of their cultural production: their art and their music. One of the characteristics of colonization is that in order for the colonizers to oppress the people easily they convinced
themselves that the colonized have a mere biological life and
never an historical existence.” (Freire, 1971, as cited in Hall,
2005, p. 7)

Freire is addressing the realities of knowledge creation among a people who have endured the
effects of colonialism which includes the dampening of people’s belief in themselves and as a
consequence their diminished ability to see their own unique contribution as part of the human
story. In a similar way, older adults, marginalized by a youth-seeking culture, can lose
connection with their own life-story and in doing so lose sight of the meaning and purpose that
their story brings to their day-to-day life. No longer employed in active work, a pursuit which
may have lent meaning to their lives, and facing multiple losses, including the loss of health,
the loss of association as well as the loss of friends and family members due to death, it is
increasingly important for the sake of continuity with the life that they have lived, for their
stories to be known and validated and incorporated into the present in a way that extracts
meaning from the past and looks toward a hope-filled future (Clandinin & Connelly, 2000).

This engagement strategy will benefit from a CBPR approach in that the principles of
CBPR as elucidated by Israel et al., (2003) are consonant with the scope and aim of the
exercise. The congruencies with the principles as set out by Israel et al. are as follows:

1. **CBPR recognizes community as a unit of identity.**

   While residents at Luther Court may in fact identify with several
   communities, including their own families, their cultural or ethnic
   community, their faith community, their professional association (to name a
   few examples), Luther Court itself is a community of older adults, who
benefit from living in a setting that provides care and services to sustain and facilitate healthy living. Also considered part of this community are the family who surround the older adult, though they do not reside in the community, the staff that work in the community and the volunteers who give of their time to the community. Though all of these different groups form the “Luther Court community” it is also recognized that the older adults themselves form the core of the community, and all activities and services are centered around them. Though staff and volunteers derive meaning and purpose from their work and engagement in the community, they are there for the purpose of meeting the needs of the older adults for whom the community has been formed.

2. **CBPR builds on strengths and resources within the community.**

The engagement strategy seeks to create knowledge about those elements intrinsic to bringing a sense of meaning and fulfillment to the lives of older adults. The engagement strategy is thus premised on the belief that the necessary information it seeks is found within the resources of the community itself. The engagement seeks to call forth the unique strengths, perspectives and ideas that help to strengthen and nourish healthy social interaction and a helpful sharing of self within the community.

3. **CBPR facilitates collaborative, equitable partnership in all phases of the research, involving an empowering and power-sharing process that attends to social inequalities.**
This principle is key to the engagement strategy. Within the community you will find people living independently as well as people living there with significant health and life challenges, who require a considerable amount of assistance. Given the wide divergence between the older adults within the community and given the presence of staff who may possess power that the older adults themselves do not have, attention to collaboration and power-sharing is key to the process. An intentional CBPR process recognizes the possibility for disparities and is intentional about inclusion of all in a way that may not be equal, but ensures equity. Participation in the engagement strategy will by design need to be multi-layered, seeking different kinds of input, as participants are able. It will also require openness to knowledge creation from unexpected and unorthodox sources.

4. CBPR promotes co-learning and capacity building among all partners.

The engagement strategy is built on the premise that there is wisdom within our grasp as we seek to call forth and understand the life experience and stories that make up the fabric of the community. The co-learning that occurs between participants in the exercise leads to further engagement and capacity building in the community. Learning gained from the first engagement exercise will provide a basis for deeper and more meaningful engagement in subsequent iterations of the process.

5. CBPR integrates and achieves a balance between research and action for the mutual benefit of all partners.
Although the engagement strategy exercise is primarily concerned with the knowledge that will be extracted as it particularly benefits individuals within the community, the possibilities that the learning will have wider benefit beyond the bounds of this particular community is something to be considered. A key component of the engagement exercise however, is to put into action the learning that is gained from the exercise. The purpose of the exercise is to utilize the information in ways that enlighten and enhance day-to-day life in the life of individuals and in the life of the community.

With the principles of CBPR as a framework, I now turn to an examination of arts-based inquiry as a methodology to fill the framework. Arts-based inquiry, with its “integration of multiple methodologies used in the arts” (Finley, 2008), gives wide scope for the exploration and creation of knowledge as it is drawn from the community.

**Arts-based inquiry**

How do we truly know another person? And in the social engagement with another, how does that interaction lend meaning to life? The disclosure of self to another is a decision made which involves a level of trust and which opens up the possibility of growth and life-enrichment. For some, the disclosure of self comes easily and is readily given. For others, the sharing of self with another is more guarded. And, if we layer upon these variables, the realities of the aging process, which may include the loss of physical or mental functioning, having the opportunity to truly know and understand another is not a straight-forward process. Sometimes the physical or mental disability is all that the other sees. We forget that the old woman hunched over the walker who doesn’t hear well and whose speech may be difficult to
understand is inextricably linked by time and experience to a complete self, who at other points in her life was able to approach life with vitality and energy. The challenge lies in perception – as seeing the person as whole, as someone with a whole life experience and history that is broader than the disability that is so visibly obvious. The older person, overcome by her loss and challenge, may not know how to help another understand who she is as a whole person, in fact may have difficulty in connecting to the wholeness of her own being.

Within this milieu, the arts are a very helpful medium to navigate this territory of understanding another, as the arts engage us not only from an intellectual medium, but from a sensory and whole-body experience. Cole & Knowles (2008) argue that arts-informed research shifts the “dominant paradigmatic view…to acknowledge the multiple dimensions that constitute and form the human condition - physical, emotional, spiritual, social, cultural – and the myriad ways of engaging in the world – oral, literal, visual, embodied” (p.60).

In traditional approaches to the generation of knowledge, the pursuit of certainty has been an aim, which is reached by constructing a well-organized set of assertions that are set out for the purposes of proving the truth or the falsity that they contain (Eisner, 2008). However, as Eisner further points out, this process is limited to a particular kind of discourse and relies on language as its “representational vehicle” (p. 5). The problem is that human experience is not always reducible to language. A visual image may evoke a deep, visceral response that words alone cannot evoke. The presence of music is a powerful stimulant of memory and shared experience. Studies in music therapy have demonstrated that those who suffer from mental impairment, who may not remember which day of the week it is, or the name of their own daughter, may upon hearing the familiar strains of music be enabled to sing three verses of a song that they learned as a child (Moore, 1991; Halpern & O’Connor, 2000). An epigram
attributed to Augustine of Hippo (354-430 C.E.) says that “whoever sings prays twice” giving acknowledgement that music involves a fuller participation of self than spoken word alone (Wren, 2000). Arts-based inquiry is an approach that acknowledges and embraces that human experience is broader than knowing something intellectually, broader in fact than any one sphere of our faculties or senses. Finley (2008) states that arts-based research “makes use of emotive, affective experiences, senses, and bodies, and imagination and emotion as well as intellect, as ways of knowing and responding to the world” (p. 72). Arts-based inquiry also gives the researchers and participants opportunity to derive meaning from experience (Finley, 2008; Cole & Knowles, 2008; McNiff, 2008; Eisner, 1981). Finley further discusses that one of the markers of arts-based research is that it exists in the tensions of “blurred boundaries” which open spaces for dialogue and knowledge creation. Referring to the work of Lincoln & Denzin (2003) Finley speaks of moments of epiphany which “suspended in time are liminal moments” and explore the connections between seemingly disconnected realities. This ability to move into these “in-between spaces, which Finley describes as the “hyphen between art and social science” is a key reason why arts-based research is becoming a method of choice for those who are wishing to effect social change. Finley concludes, “It creates a place where epistemological standpoints of artists and social science workers collide, coalesce, and restructure to originate something new and unique among research practices” (p. 72). These liminal moments are entry points for meaningful discussion and revelation of truth.

Almost twenty years ago when I was a new staff member of the Luther Court Society, I was sitting in one of the lounge areas with a group of four older women who had grown up in very different communities – two in England, one in Saskatchewan and one in Ireland. All of the women were advanced in age – between the ages of 92 and 101, three of them still living
independently in their own apartments, and one who suffered with significant dementia was
living in residential care. One of the women picked up a magazine that was lying on a table and
commented on an photograph found therein of a woman wearing button boots. These boots
would have been in style around the time of World War I. The image of the button boots was a
launching point to what became a fascinating discussion. All of the women present had worn
button boots and they proceeded to tell stories woven with humour and wonder about the
wearing of such footwear. They spoke of the long metal hooks that were required to do up the
boots, they traded stories of where the best place to buy the boots had been, the comfort (or
discomfort) of such footwear and other incidental information as it related to the wearing of
button boots. What followed was a discourse into the life they knew as young women,
peppered with a discussion of the expectations placed upon them, their understandings of the
world at that time, a discussion of the lack of commodities during the war years and so on.
Although these women had grown up in communities on opposite sides of the ocean, they
described situations that held common ties for all the women present. The one woman who
suffered with dementia was as engaged as the other three in the conversation. Brought back by
a simple image to another time in her life, she joined into the conversation with eagerness and
had all the women laughing as she described her mother’s reaction to the first pair of button
boots she owned. The whole conversation did not last more than 45 minutes, yet the bond of
connection and shared experience between those women was strengthened and brought into the
open for examination in the telling of their stories. It was a moment suspended in time, which
allowed past experience to blend with the present in a way that brought meaning and a sense of
joy to all who participated.
Audra Cole narrates an experience following her mother’s funeral as the family made their way to the cemetery. Cole states:

The silence of our inconsolable grief was finally broken by my niece who, between body-wracking sobs, pleaded with her father to tell some “Nanny stories.” Telling stories of my mother, at a time when almost nothing made sense or seemed fair, was the only thing that did make sense to us. After all, “The truth about stories,” says Aboriginal scholar Thomas King (2003, as cited in Cole & Knowles, 2008) “is that’s all we are.” They are who we are, who we have been, and who we will become. (Cole & Knowles, 2008, p. 56)

Arts-based research provides an entry to these kinds of human experiences. The form that the research takes and the medium(s) it employs may be driven by the kind of data or experience they are relaying, by the researcher’s artistic identity or based on the intended audience for whom the research is directed (Cole & Knowles). In a multi-faceted arts-based research project regarding caregiving and Alzheimers’ disease, (Cole & McIntyre, 2006; McIntyre & Cole, 2006), a mixed media installation was constructed that recognized the lives of those who live with Alzheimer’s’ Disease and those who care for them. As the stated goals of the project included public education and caregiver support, the researchers attempted to raise public awareness about Alzheimer’s’ Disease and to provide opportunities for those directly affected by the illness to gain a sense that they were supported and accompanied on their journey. The installation was displayed for several days in prominent places across Canada. Family caregivers were invited to view the work and share their experiences through
group and individual conversations, as well as with written submissions that reflected their experiences. The general public was invited to provide written comments and audiotape-recorded stories in response to the work. In a multi-layered format, people were engaged to ponder, reflect individually and collectively in a variety of mediums (poetry, journal-writing, photography, etc.) in a way that opened up the conversation broadly about the realities of an illness that is much-feared and misunderstood. It allowed expressions of support and affirmation to be given to those most directly affected by the illness. The arts-based process provided a safe space for people to talk about, question, respond to and increase their awareness about Alzheimer’s Disease.

An arts-based medium allows for the intersection of a variety of entries into the issue-at-hand. It has the capability to break through barriers of language, background, preconceptions and open a dialogue that leads to the creation of knowledge and understanding. It raises important questions for consideration which may open the way to further investigation and reflection.

This particular engagement strategy seeks to draw out the stories of the older adults who are part of the Luther Court community in a way that helps them to connect or re-connect to a past that sheds meaning on their present and future reality. It also helps the community members to gain a deeper understanding of one another. It further opens the possibility for opportunities for deeper engagement in the community through social or service-related opportunities that may again bring a sense of purpose and fulfillment in the day-to-day lives of community members. Within the context of a community-based participatory model of arts-related research, two methodologies will be explored as tools to aid in eliciting the stories of the community: narrative inquiry and reminiscence theatre.
Narrative Inquiry

Although strictly speaking, narrative inquiry is a qualitative research methodology in its own right and is not necessarily associated with arts-based inquiry, nevertheless, it is useful to explore the wide body of literature regarding its application to better understand the ways in which narratives surround and inform our lives.

Chase (2008) defines narrative inquiry as “an amalgam of interdisciplinary analytic lenses, diverse disciplinary approaches, and both traditional and innovative methods – all revolving around an interest in biographical particulars as narrated by the one who lives them” (p. 58).

Clandinin & Connelly (2000), begin their discourse in narrative inquiry by drawing attention to the work of John Dewey. They lift up Dewey’s assertions that experience is both personal and social; both dimensions are always present and the individual cannot be understood fully outside of their social context. Furthermore, Dewey asserts that experience is a continuum, that is to say that experiences grow out of other experiences and experiences lead to further experiences. So then this continuum infers that every present experience has a past experiential base and leads to an experiential future (Dewey, 1922, as referenced in Clandinin & Connelly, 2000). Using Dewey’s insight as a point of reference, Clandinin & Connelly further suggest that all experience is temporal and can best be understood in terms of the continuum. The meaning of events may change as time passes and that change in meaning is critical to understanding its import for the present. “Stories are constantly being restructured in the light of new events, because stories do not exist in a vacuum but are shaped by lifelong personal and community narratives” (p. 2). The narratives of a person’s life, then, are critical for comprehending the meaning of that life. Webster and Mertova (2007) echo this line of
reasoning in their statement, “People make sense of their lives according to the narratives available to them” (p.2).

Clandinin & Connelly (2000) conceive that a narrative inquiry should take four directions:

...inward, outward, backward and forward. By inward, we mean toward the internal conditions, such as feelings, hopes, aesthetic reactions, and moral dispositions. By outward, we mean toward the existential conditions, that is, the environment. By backward and forward, we refer to temporality – past, present and future. To experience an experience - that is, to do research into an experience – is to experience it simultaneously in these four ways and to ask questions pointing each way. (p. 50)

Dyson & Genishe (1994, as cited in Webster & Mertova, 2007), argue that we all have a basic need for narrative so that we may organize our lives into ones that hold meaning and accounts of important happenings.

In narratives our voices echo those of others in the sociocultural world, and we evidence cultural membership both through our ways of crafting stories and through the very content of these stories. Narrative should not be looked upon as separate from real life, but as forming meaningful connections to that life. (p. 2)
Those who practice narrative inquiry are encouraged to ask open-ended questions of the interviewees with a view to connecting to the narratives that bring understanding and cohesion to the life of the narrator. Webster and Mertova suggest the following list of questions as helpful to reflect on pertinent events:

1. Think of one memory you have of <context of investigation>.  
   Tell me about it.

2. Thinking back to <context of investigation>, what do you remember or recall?

3. If there was one main memory of <context of investigation> it would be...

4. Within the <context of investigation>, do you remember a particularly stressful period?

5. How would you say it has influenced you?

6. What role did others play in this event (critical others)?

7. If there was one thing you would say about that event it would be…

8. How would you describe or tell of the changing influence and long-lasting effects? (p. 86)

In the context of narrative inquiry within the community at Luther Court there will be some who could answer questions such as those posed above, easily and with the potential for
applying the content of the resulting narratives to their present life circumstance in positive life-affirming ways. There will be others, who due to physical and mental challenges will be unable to respond within that type of medium. To uncover the narratives that are present will require creativity, persistence, innovation and serendipity. The narrative inquiry methodology sheds a great deal of insight as to the importance of the narratives themselves, and their importance in helping to make sense of life experience as the past, present and future realities extend upon a continuum that surrounds and holds human existence.

An arts-based approach to uncovering these narratives broadens the possibility for discovery amidst a community that is home to people of vastly different abilities. As the community uncovers a narrative, and holds up an image or a shared experience or some other touchstone of life experience, it is anticipated that this narrative in whatever shape it is presented in, will trigger further pieces of the narrative, both individually and collectively. The process is one of action, reflection. The story or image is presented, reflected upon and gives rise to further uncovering of the narrative. Just as the image of the button boots gave rise to a conversation of shared experience filled with meaning, so this process of uncovering and calling forth the narrative is not a straight-forward process. Presentation of images and stories will touch individuals in different ways and engage the story in a way that may pull it in a different direction. All of the senses are called upon – in the hope of finding the one that makes the important connection for the right person.

Visual images will be helpful, memories linked to smell and taste are also powerful reminders of experience, and a story that is vested in the authenticity of lived experience can spur the memory of either a similar or conversely an antithetical memory to which it has become associated.
Exploring the use of reminiscence theatre as a method to help to embody the narrative is something that will be set out in the engagement strategy.

**Reminiscence Theatre**

The use of theatre as a vehicle for exploring and understanding issues and for evoking a response is an age-old practice, evident from the days of early Greek drama (Nisker, 2008). Theatre is increasingly being utilized as an effective medium for engaging people around a wide variety of issues to effect social change and to understand and explicate the issues of people who are marginalized, misunderstood or silenced, and to provide a wide array of voices, indeed sometimes a cacophony, in order to engage people in critical issues (Boal, 1979; Munier & Etherton, 2006; Ganguly, 1985; Fredland, 2010; May, 2007). The purpose of theatre is not to provide a unified voice, but rather to provide a mechanism to allow a variety of voices to be heard, in a way that invites others into the dialogue. Applied theatre is an umbrella label that is useful for “finding links and connections for all of us committed to the power of theatre in making a difference in the human life span” (Taylor, 2006, as cited in Prendergast & Saxton, 2009, p. 6). Applied theatre includes forms such as theatre-in-education, (Jackson, 1993), popular theatre (Etmanski, 2007; Prentki & Selman, 2000), theatre of the oppressed (Boal, 1979), theatre for development (Munier & Etherton, 2006; Ganguly, 1985), and reminiscence theatre (Basting, 1995; Schweitzer, 2007; Dobson & Goode, 2002). These different forms of applied theatre engage participants, both actors and audience in an interactive process that either seeks to reassert and celebrate memory (e.g. reminiscence theatre) or to undermine the status quo in order to promote positive change (e.g. popular theatre, theatre for development, theatre-in-education (Prendergast & Saxton, 2009). Though, it must also be said that these different forms of theatre can also realize the opposite side of the dialectic. For example,
theatre-for-development, certainly stirs the status quo, seeking positive change. At the same
time, within the form is also tremendous opportunity to celebrate and make known the stories of
the people who have lived in the margins. Similarly, practitioners of reminiscence theatre in
the evocation and celebration of memory, may find that the summoned memory may serve to
challenge realities of ageism, and in doing so upset the status quo to effect a positive change.

Basting (1995), in recounting the history of reminiscence theatre, discusses an evolution in this
medium. Reminiscence theatre began with the recognition of the importance of the memories –
of the narratives themselves, – first of all for the sake of integration and derived meaning for the
narrators or originators of the story, but also for the sake of those who heard and were enriched
by the stories. As the form developed over time, although these elements were certainly still a
key component, a recognition was also growing that this kind of theatre frequently was
characterized as “politically-oriented drama” (p. 128), and Basting predicts that we will see a
greater degree of this evolution as the so-called “baby-boomer” generation ages, bringing about
a demographic shift with an ever-growing number of seniors in our population.

All of the applied theatre formats afore-mentioned utilize an interactive theatre process
wherein the audience members are not passive, but rather are active participants in the
between an “accidental audience” and an “integral audience.” The accidental audience is one
you would expect to see at a mainstream theatre production that is a commercial, publicly
advertised event. In this scenario the interaction between the audience and the performers is
minimal and the interaction does not usually change the content of the performance. The
integral audience, on the other hand is essential to the very nature of applied theatre. Audiences
are asked to engage both verbally and in some cases, physically with the actors. Their
participation has the power to “effect changes in the performance itself in a number of ways. At the very least, an applied theatre piece will generally include a carefully facilitated post-show discussion that gives spectators the space needed to process and respond to what they have seen” (Prendergast & Saxton, p. 21). This interactive process is a defining mark of applied theatre methods. The influence of Brazilian director Augusto Boal (1979) is widely evident in applications of interactive theatre. Boal’s *Theatre of the Oppressed* uses a forum theatre approach wherein the play is presented first in its entirety, and then is presented a second time. In the second occurrence the audience members are encouraged to yell “stop”, come onto the stage and replace a character. By entering into the drama in this way, they insert an alternative course of action or alternate idea into the very fabric of the play. The technique allows for some creative and educational outcomes to be explored with the possibility that a strategy for social change can be formulated. Etmanski (2007) in her discussion of Boal’s technique suggests:

> When they do come on stage, these audience members try to change the outcome of events so that the character, in changing her or his behaviour, can also change the outcome of the oppressive interaction. Not all interventions are successful, which means that community members can use theatre not only to imagine solutions to their problems, but also to investigate the feasibility of the solutions offered by audience interventions.

(p.109)

Boal provides but one example of interactive theatre. Ideas generated through discussion with audience participants can be gathered and inserted into the play as new information. Different
scenarios can be explored – and their viability tested in that forum, as Etmanski suggests. The play that is presented may stir other memories or experiences that are relevant to the drama and their inclusion may enrich and expand the impact of the drama and help to further the intention that lies behind the production. Prendergast & Saxton (2009) assert:

Those who create and spectate in applied theatre have a concern for the issue or issues under consideration and are interested in collectively reflecting upon them...The potential success of any applied theatre piece relies on the fact that the concerns, issues or ideas are available to an audience – that is, that the drama portrayed has relevance and resonance with the lives of those who witness it. Reflecting with an audience on how and why a performance works in terms of the meanings it makes, or fails to make, is a key component in gauging the impact of applied theatre.

Reminiscence theatre uses drama to recall the memories and experiences of older adults. Schweitzer (2007) describes reminiscence theatre as that which “dramatizes and makes theatre from memories” (p. 13). Sometimes these experiences are simply shared and enjoyed by a small group. Other times they are developed into performances that may employ either elderly actors themselves, or professional actors. The purpose of reminiscence theatre is two-fold: “to generate memories and to use those memories to engender further memories and story-making from their audiences” (Prendergast & Saxton, 2009). Stories are collected either in writing or by audio-tape, collected through one-to-one interviews, small group discussions, pieces of writing the seniors have done themselves, or a combination of all of the above. These stories
serve as the basis for a script, which is then relayed to an audience – an audience that often includes the very people whose stories it tells, along with their families, care-givers and other interested persons or guests. Following the performance, conversation is encouraged to further engage those present and may lead to revisions or further story-telling/dramatization. The stories may have been interpreted and fictionalized in the performance, but if done well, an authenticity of experience will be noted. Dobson & Goode (2002), advance that “although the reminiscences will provide the raw material on which the performance will be built, the final piece will need to address the general concerns of the seniors as an interest group, rather than faithfully depicting the individual stories in their detailed particularity” (p. 181). Similarly, practitioners of reminiscence theatre (Nicholson, 2003, as cited in Prendergast & Saxton, 2009) also discuss the importance of distinguishing between reproduction and representation of the narratives. Although initially it may appear that those who are enacting the stories, must faithfully reproduce them, to do so, ironically, may deplete them of their hidden strength. Dobson & Goode argue that the power of drama can actually transform the stories so that new learning can occur. As the stories are taken and fictionalized, drawing out those elements that are “fundamental and universal to the human condition” (p. 183) the seniors are enabled to see themselves in the story (e.g. the stories are authentic- they ring true) but at the same time they provide a medium to identify with the “other” in what Dobson & Goode refer to as the “dramatic imagination, which in the context of reminiscence theatre, provides the potential for viewing past experience from a new vantage point” (pp. 183-4).

The performance may provide opportunity for a process of life review wherein older adults “define themselves and create meaning from what can seem a lifetime of random, sometimes painful events” (Basting, 1998, p. 114).
The value of reminiscence theatre is that it uses theatre to reframe the stories of the elderly into performances that provide meaning and confirmation, not just to those whose stories are being told, but also as prompts for the stories of the audiences who are most usually seniors and, their caregivers and family members. For these latter groups, reminiscence theatre can become invigorating stimuli to promote reconnection and respect for the past through the conversations that ensue after the performance. (Prendergast & Saxton, p. 170)

In some instances it has proved to be a valuable medium for understanding how issues were viewed in another time, and the resulting consequences for the one who lived that experience at a particular time. For example, a London-based group, called *The Good Companions*, mounted a production called *Our Century and Us*. In it, a group of older actors, shared life experiences as they had known them, throughout the 20th century. During the play, one woman speaks of her experience of going through divorce in the 1950s. Bornat (2001) describes that event as follows:

She describes the stigma, the exclusion and rejection which her erstwhile friends and neighbours visited on her. The other performers then joined in with brief exchanges to illustrate this cold and wounding behaviour...The process of arriving at this particular scene involved interrogation, on an individual and group basis. More than that, the scene inevitably interrogates audiences that include people who themselves are divorced or
who have to come to terms with their own actions in relation to divorcing neighbours and relatives. The process of reminiscence is also interrogative and while the individual account stands out as a performative act (whether in a play, a group or in a one-to-one exchange), the extent of that interrogation is set by the individuals taking part. Indeed, the background to the performance illustrates that people arrive at some kind of reconciliation with past life events by taking different paths. The Good Companions actor who played out her experience of divorce had not previously found a way to talk about this painful experience. The process of interrogation from her group members and the shaping of the account for wider audiences provided her with the means. Working in a reminiscence context enabled her to find a method, in this case a public performance.

(p. 229-30)

Encouraging reminiscence can be an art in and of itself. Dobson & Goode (2002) list several key considerations to engage seniors in collecting their narratives. Some of these considerations include:

1. Use as many sensory aids to memory as you can (e.g., songs of the era, radio broadcasts, old newsreels, pictures and photographs, things to smell, and things to taste etc.) Tied to these sensory aids may be questions attached that query “How did you think/feel at the time? as a picture or old broadcast is utilized.
2. Select an historical event as a point of reference – be it a national event, a community event. Solicit their opinions on the differing attitudes which may have surrounded the event. How did it affect people’s everyday lives?

3. Sometimes it is helpful to focus around a particular aspect of daily life as opposed to a specific event. Individual and personal experiences can be related to religion, local markets, street traders, employment, transport, radio shows, dances, theatre, fashion, music, domestic chores, health, relationships, living conditions, social reforms, family values etc.

4. Managing the discussion is critical – to keep a sense of the timing and pace; to prompt and guide conversations where necessary; and, focus ideas back for the whole group when appropriate.

5. The use of a tape-recorder (given that the participants do not object to its use) is invaluable as it allows you to go back and listen for pieces that you may have missed – and because it is impossible to record everything in writing quickly enough to capture all that is said. (p. 185-7)

Clearly reminiscence theatre holds promise as a means to stimulate the memories of older adults, to utilize the core of those memories to encourage new learning from the experiences they contain as the continuum of past experience collides with present reality and provides a possibility of transport to a hope-filled future. Engaging in reminiscence theatre
may be one way for older adults to claim a sense of meaning and purpose that is based existentially in their own realm of reference.

Summary

In this chapter, I have explored some of the methodological bases for an engagement exercise to be constructed for older adults living at Luther Court in Victoria, B. C. I have included an exploration of the overall framework of a community-based participatory research design. Within that overarching structure, I turned my attention to an examination of arts-based inquiry, which allows for a rich set of resources to be put into play that have the potential to engage people intellectually, emotionally, spiritually and sensuously. The whole person is engaged, body, mind and spirit, in the quest for knowledge and new insights. Within this arts-based inquiry, I have looked at some of the literature surrounding narrative inquiry, and most specifically at the use of reminiscence theatre, as a powerful vehicle for engaging older adults in a journey of self-discovery and re-discovery along a continuum of past, present and future experience. The use of reminiscence theatre may be at one and the same time an important device for individual growth and for community enhancement and growth.

As we turn to the next chapter, I will build an engagement strategy design. This design flows out of the research covered in Chapter 2 and is based on the methodological principles and approaches set forth in this chapter. The design set out in the next chapter is by nature, open-ended. It is a starting place for the community to engage in the extracting and gleaning of knowledge and co-learning. As such, it must be flexible enough to bend to the needs and interests of a community that together is on a journey of discovery.
Chapter 4: Engagement Strategy

We hear people talking about the old country, the olden days, and old friends, as if their pains and joys had composed a melody that is growing to a silent climax. Then we know that slowly but surely, in the broken, beaten faces of the many who belaboured the world for years and years, a new light has become visible – a light that cannot die because it is born out of growing old. (Nouwen & Gaffney, 1974, p. 60-1)

Introduction

In this chapter I set out the engagement strategy which is designed to elicit the narratives of older adults living at Luther Court, in a way that may provide a variety of benefits to them individually and collectively. Utilizing a community-based participatory research model, the design is intended for the community together with facilitators, to draw the link between the research process in place and transformative action wherein the community members are active participants throughout (Selener, 1997). In order for the community to provide input and exercise control over the engagement strategy, it is intentionally designed to be a flexible process that can be adapted as the community directs and in a way that best meets the needs-at-hand. The engagement strategy is meant to be iterative in nature – that is to say that it can be used again and again in different contexts, sometimes taking the learning already generated into the next iteration, and sometimes starting afresh to use the tool for a different purpose. Here then are some tools for the journey. How they are used will be tailored to the people who facilitate and participate in the process and will be sensitive to the priorities of the task-at-hand. After a discussion of the goal(s) for which the engagement strategy will be used, the tools will be put into play. These tools include a engagement strategy worksheet wherein the community formulates objectives to meet their goal(s), names participants to the exercise, ensures ethical standards for research are met, names a facilitator or consultant for the
engagement strategy, gathers necessary supplies and equipment and draws up a calendar of activity so that all are aware of the components of the process. Further tools for the engagement strategy involve the analysis of the data gathered, together with suggestions for the translation of that data into action where appropriate. And the tool of evaluation is included in order that the community might learn from the exercise and take recommendations forward to the next iteration of the engagement strategy. Less obvious tools, but equally important, are the tools of openness and flexibility, the tools of humour and creativity, the tools of unflagging spirit and curiosity and the invaluable tool of an overriding attitude of cooperation wherein all participants value the unique contribution each brings to the engagement strategy.

**Goals**

As a starting place for this engagement strategy, three goals can be identified arising from the literature review and methodological inquiry, as outlined in Chapters 2 and 3, and in view of the context of Luther Court, as outlined in Chapter 1.

These goals are as follows:

1. To create a forum for the narratives of the older adults of the Luther Court community to be told and heard and honoured, linking present reality with past experience in a way that may add meaning and purpose to the lives of participants, and potentially draw them more deeply into the life of the community itself in a beneficial way.

2. To enable the community at Luther Court to explore together the key concepts of the Luther Court Model of Care, *Life Together*, to evaluate its focus and direction in light of the interests of the key stakeholders, and to suggest revisions that would benefit those for whom it is designed to serve.
3. To learn together as a community what constitutes significant engagement for those living there, and to explore and facilitate volunteer opportunities both within and outside of the community to provide older adults the opportunity to offer meaningful service to others.

Further goals may be identified by the community and the goals stated above are subject to review and revision. Under each of these goals in this engagement strategy, the community needs to identify objectives which will facilitate the implementation of the goals. Developing objectives for the above-stated goals will be discussed in more detail subsequently in this chapter. However, first we turn our attention to the design of the engagement strategy: a worksheet that gives an overview of the process and tasks therein that will aid in achieving the stated goals.
Figure 1: Engagement Strategy Worksheet

<table>
<thead>
<tr>
<th>Goal:</th>
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<table>
<thead>
<tr>
<th>Identified Participants:</th>
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<table>
<thead>
<tr>
<th>Objectives</th>
<th>Time Frame</th>
<th>Progress</th>
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<tbody>
<tr>
<td>1.</td>
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<tr>
<td>2.</td>
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<tr>
<td>3.</td>
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<td>4.</td>
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<table>
<thead>
<tr>
<th>Methodology Chosen</th>
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<tbody>
<tr>
<td>e.g. reminiscence theatre, memory boxes, one-to-one interviews, small group discussion, music therapy, story-telling etc.)</td>
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<table>
<thead>
<tr>
<th>Approval obtained from LCS Ethics Committee</th>
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<tbody>
<tr>
<td>Yes (  ) No (  ) In progress (  )</td>
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</table>

<table>
<thead>
<tr>
<th>Facilitator/Consultant</th>
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<table>
<thead>
<tr>
<th>Supplies/Equipment required</th>
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</thead>
<tbody>
<tr>
<td>(e.g. cameras, photographs, hearing assistance pocket talkers, props, etc.)</td>
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</tbody>
</table>
### Calendar of Activity for Engagement Strategy:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Date/Location</th>
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### Other Pertinent Information

#### Analysis of Data

<table>
<thead>
<tr>
<th>Who is involved</th>
<th>Action taken to implement learning</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

#### Evaluation of Engagement Strategy

1. Have the strengths and resources within the community been identified and built upon?

2. Have collaborative, equitable partnerships been evidenced in all aspects of the engagement strategy, involving a power-sharing process that attends to inequities?

3. Has there been new learning and capacity-building evidenced?

4. Has there been a balance between reflection and action?

5. Has the information been relayed to the appropriate persons/committees within the community for follow-up & implementation?

6. Any other observations?

#### Next steps

1. 

2. 

3. 
I will now work through elements set out in the Engagement Strategy Worksheet as a means to understanding the variety of ways that it can be used in the community.

**Exploring the tool**

Three goals have been identified as rising out of the scope of the research supporting this engagement strategy as it applies to the context of the community at Luther Court. Certainly, in light of the fact that the overall design rests in the principles of community-based participatory research, the goals will necessarily need to be reviewed and adopted by the community. They may also choose to add to the afore-mentioned goals. The process begins with an identified goal being selected. The participants for the exercise are then named. To clarify how the identification process of participants may occur I turn to a brief description of the Luther Court community.

**Defining the Community.**

Luther Court is a group of older adults that live at a common address or participate in programs offered there in a community of care that includes a range of housing and care services. Within the community of care are people who are living in complex care, with 24-hour nursing care provided; people living in assisted living, who live independently in their own apartment, eat two of their meals in a communal setting each day and who receive a cluster of personal care and support services to enable them to maintain their independence; people in independent housing who do their own cooking and are fully responsible for their own needs; people in the adult day centre who live in the surrounding area but come to Luther Court for a day program to provide opportunities of socialization for them and sometimes a period of respite for their caregivers. The Luther Court community is also comprised of the families who surround all of the older adults who form the core of the community, as well as a group of
approximately 125 staff and a group of 115 volunteers (of which some are the older adults themselves and some are from the outlying community.) Although all of these sub-sets of the community are important and the Society aims to provide a cohesive sense of belonging for all, nevertheless, it must be stated that the purpose of the Society is to meet the needs of the older adults – and therefore they form the core of the community. Their needs must take priority, and the organization needs to be structured around the successful meeting of those needs. For the purposes of the engagement strategy, the tool may be operating within the different sub-sets of the community. For example, an engagement exercise could be occurring in the adult day centre. A similar, but not identical exercise may be occurring amongst the people in assisted living. Or, the exercise may include people from across the breadth of the community of care, who are associated with different programs/services. There may also be an engagement strategy at play within the family council, or in the leadership team, or the board of directors or within a designated volunteer group. In all of these cases, it is important to identify the target group so that the exercise is suitably structured – and in subsequent iterations of the exercise, it may be useful to see if the outcomes are similar between the different groups involved. The reason to identify sub-groups is not to divide the community, or to exclude interested persons from participation. It is rather to ensure that the adequate kinds of supports are in place to enable as full as participation as possible, given the different health and well-being challenges that exist across the community and to meet the needs of each sub-group, at the same time as appreciating the community as a whole. In all iterations of the engagement strategy, however, no matter who the participants are, it must be clearly understood that the sole reason for any engagement strategy is to further the stated goal, and in doing so bring benefit to the older adults who comprise the community at Luther Court.
Once the participants have been identified, the next important task is to state the objectives that will aid in accomplishing the goal.

Objectives.

Tear, et al., (2005) identify goals as “broad and visionary” while objectives “must be measurable in order to ensure effective evaluation of progress” (p. 837). In addition to the objectives being measurable, Tear, et al. go on to describe objectives as being impact-oriented, time-limited, specific, and credible.

As the goals are broad and visionary by design, the objectives should be specific and related to the particular context of the engagement strategy. For example, if we were to utilize the engagement strategy to explore Goal #1, involving participants from the adult day centre, the objectives could appear as follows:

Figure 2: First Example of a Goal and Objective-Oriented Engagement Strategy

<table>
<thead>
<tr>
<th>Goal:</th>
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<tbody>
<tr>
<td>1. To create a forum for the narratives of the older adults of the Luther Court community to be told and heard and honoured, linking present reality with past experience in a way that may add meaning and purpose to the lives of participants, and potentially draw them more deeply into the life of the community itself in a beneficial way.</td>
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<table>
<thead>
<tr>
<th>Identified Participants:</th>
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<tbody>
<tr>
<td>Members of the Luther Court Adult Day Centre</td>
</tr>
<tr>
<td>Activity Staff from the adult day centre</td>
</tr>
<tr>
<td>Chaplain</td>
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<tr>
<td>Social Worker</td>
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</table>

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Time frame</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. To engage the activity workers, social worker, and the chaplain in eliciting and recording the narratives of the older adults who participate in the adult day centre at Luther Court.</td>
<td>September 2011 – November 2011</td>
<td>Time has been set aside to accomplish this task</td>
</tr>
<tr>
<td>2. To engage the services of a professional actor/consultant with</td>
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knowledge of and experience in applied theatre, to review the narrative material collected, conduct further interviews with the older adults, as needed, and provide consultation as to how to utilize reminiscence theatre as a way of further engaging the older adults.

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<tbody>
<tr>
<td>November 2011</td>
<td>Initial contact has been made</td>
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3. In consultation with the professional actor/consultant, design, rehearse and perform a reminiscence theatre piece, which although fictional in its particulars, draws on the information gathered from the stories of the community.

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<tr>
<td>November 2011 to February 2012</td>
<td>Outstanding</td>
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4. Gather feedback from all who participated in the reminiscence theatre project and evaluate its effectiveness, determining whether learning emerged from the process and how that learning could be best-utilized in the next iteration of the process.

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<tbody>
<tr>
<td>February 2012</td>
<td>Outstanding</td>
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The objectives stated above may be quite different if they were being drafted by a different sub-group within the Luther Court community. If the engagement strategy was happening within the family council, for example, they may utilize a wholly different set of objectives that could look as follows:

**Figure 3: Second Example of a Goal and Objective-Oriented Engagement Strategy**

**Goal:**

1. To create a forum for the narratives of the older adults of the Luther Court community to be told and heard and honoured, linking present reality with past experience in a way that may add meaning and purpose to the lives of participants, and potentially draw them more deeply into the life of the community itself in a beneficial way.

**Identified Participants:**

Members of the Luther Court Family Council and their family members who reside at/or participate in programs at Luther Court.

Social worker

**Objectives**

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<tbody>
<tr>
<td>Time frame</td>
<td>Progress</td>
</tr>
<tr>
<td>May 2011 – July 2011</td>
<td>2 narratives have been collected</td>
</tr>
</tbody>
</table>
2. To gather photographic, and other visual images, family keepsakes, handcrafts etc. to accompany and exemplify the narratives of family members of the Luther Court Family Council members  
   May 2011 – July 2011  
   In progress

3. To hold an interactive story-telling event to share the stories that have been recovered  
   September 2011  
   Date has been set and room booked

4. Gather feedback from all who participated in the interactive story-telling event and evaluate its effectiveness, determining whether learning emerged from the process and how that learning could be best-utilized in the next iteration of the process.  
   September 2011  
   Not completed

You will note that using the same broad format, the objectives become tailored to meet the needs of the identified participants, allowing for a flexibility and responsiveness to the particular interests and considerations of a given group. The findings can be evaluated, the learning that has occurred identified and utilized, either in further iterations of the engagement strategy, or by implementing the learning in ways that change and enhance the culture for the older adults in consonance with their own research. Under each stated objective there may be developed a further work plan that delineates specific tasks that will be undertaken to enable the objective to be completed.

**Choice of Methodology.**

As discussed in Chapter 3, there are methodologies that have been suggested as useful in achieving the desired goals of the engagement strategy. These methodologies include narrative inquiry and arts-based inquiry, with a specific focus on reminiscence theatre. Within those broad parameters, the engagement strategy is flexible enough to utilize a choice of methodologies. Employing various methods to accomplish narrative inquiry may include one-to-one interviews, small group discussion, interactive story-telling sessions, etc. The narrative may be taken and woven together into reminiscence theatre – a fictionalized realization of the
essence of the narrative collected. As a series of narratives are collected, the community in research together, will look for recurrent themes that may be woven into a common story. The common story will embody characteristics of the narratives that arise out of the community. As such, it has the potential to be a bearer of truth that will resonate within the community and give opportunity for the dramatic imagination to draw forth new insights in a creative interplay between personal and shared experience. This story can be enacted by a group of actors; the actors may be members of the community itself, or they may be university drama students, or professional actors. The specification of who will take on that task will be included in the engagement strategy. Regardless of who the actors are, the performance is dialogic in nature.

The scene is presented and there is opportunity for comment and discussion with the actors and the community. Out of that discussion new narrative arises and new possibilities for incorporating that narrative into the shared story are explored. Here is where the cyclical nature emerges as the process of enacting gives rise to further reflection; an iterative process. The importance of the interactive nature of the drama is a key element. It is not only the stories that are collected and portrayed that are of significance – but it is the invaluable reflection that occurs as a result of interaction with the audience, who is presented with the information, digests it, and offers new insights that can be incorporated into the drama, thereby deepening and enriching the experience. As observed in Chapter 3, Dobson & Goode (2002) argue that the power of drama can actually transform the stories so that new learning can occur, linking them from the particularity of one person to a more universal understanding. In this transformation, past experience may be a springboard to understanding the experience differently, with the potential for learning and growth.
If the engagement strategy is utilized with people with dementia, it may be particularly important to include visual, tactile and sensory props. The use of memory boxes, which contain items that may have been familiar to individuals at an earlier stage of their lives may be useful. The use of music is a powerful aid in engagement, drawing us through melody and words, rhythm and movement towards experiences stored deeply within our person. The engagement strategy may suggest using a program such as TimeSlips Creative Storytelling Project (2011), a program developed by the University of Wisconsin, Milwaukee, wherein the “pressure to remember is replaced with the encouragement to imagine” (para.1). Open-ended questions are asked, recorded and then woven into a common story. Greeting cards, calendars and magazine pictures become aids in triggering memories, without having to remember “exactly who it is” or “what happened.” The facilitator asks not “What is his name,” but rather, “What shall we call him?” The stories freely woven together serve to help us understand the experience of those living with dementia.

Similarly, the engagement strategy could be designed to be a mixed-media presentation such as McIntyre and Cole (2006), researchers from the University of Toronto have done, producing a DVD which utilizes visual images, poetry, recollection and story-telling relating to people’s experience of living with Alzheimer’s Disease and the experience of caring for people with Alzheimer’s Disease.

In any and all of these different methodologies the design will intentionally seek to create a medium that is the bearer of a community’s stories. The careful listener will hear not only the content of the stories, but the meaning that the narrator(s) attach to the story. Certain parts of their story may be emphasized over others. The story may be told over and over again,
but with a slightly different meaning attached. The design is intentionally one of action/reflection, cyclical in nature.

These narratives hold the possibility of unveiling significant events or circumstances of life that are important to the narrator of the story and the fundamental core of the story may be of great significance to others within the community, perhaps to the community as a whole. They may be useful in helping to engage the person in the community, whether that is in a social context or in a service context, as an aid in effective care-planning or simply as a way of gaining a deeper understanding and appreciation of the individual.

And as we are dealing with human lives, and the potential to touch those lives for good or for ill, it is important to consider the ethical implications of any engagement strategy exercise.

**Ethical Considerations.**

The environment at Luther Court is one which is protected by government legislation. All staff who work at Luther Court must sign an oath of confidentiality and the Society has policies and procedures that direct our practices with regard to the protection of the personal information of the older adults who live in the community or participate in its programs, and the personal information of our staff.

In all engagement strategies, care will need to be taken with regard to the information that is gained through these exercises, because personal information cannot be divulged without adequate, informed consent. Although the narrative is deeply particular, the process must also have a mechanism to globalize the issues portrayed so that they do not call attention to any one resident or staff member, for example, by creating fictionalized characters that combine elements of multiple stories. If there is a compelling story to be told that by its very nature calls for the resident or staff member’s identity to be known, express informed consent must be
obtained from that person or from their designated alternate decision-maker. Or, if the narrative that is obtained will be used only in conjunction with the originator of the story, such as in care-planning, the information will be treated with the same kind of protocols that surround all confidential material contained in a resident chart.

As the engagement strategies are identified as being research projects, in which the community engages in the creation of knowledge together, they must be referred to the Luther Court Ethics Committee for review and approval. This is according to established Luther Court policy and procedure. The Ethics Committee will be looking to ensure that the privacy of the residents is not compromised, the methods of undertaking the research stands up to investigation and meets the ethical standards of fairness, honesty, authenticity and respectfulness and that ethics are threaded throughout the process in a transparent and demonstrable way.

Should there be an engagement strategy conducted which was to involve students from the University of Victoria, for example, and the findings of the research generated was to be submitted to the university for a graded paper, then the students would need to submit an application to the Human Research Ethics Board (HREB) as per university policy and procedure (University of Victoria, 2011).

Luther Court has developed and utilizes an ethical assessment tool, which is helpful in exploring complex and multi-faceted ethical issues. This tool will be helpful in assessing the suitability of a proposed engagement strategy proposal in light of the values and culture of the Luther Court Society, and in light of respecting and protecting the rights of the community members themselves.
Considering ethical concerns is a critical part of the engagement strategy planning, and should be in the forefront throughout the entire engagement exercise. Also important in the planning of the engagement strategy is identifying the necessary supports and skill-sets that will be needed to engage the community in the designated exercise. Therefore we examine the role of a facilitator/consultant in the engagement strategy.

**Involvement of a Facilitator or Consultant.**

Depending on which methodology is chosen for the engagement strategy, it is important to identify who will provide leadership for the project. Again, the process is fluid and a number of possibilities can be entertained, depending on the circumstances. If the community is engaging in a methodology with which they have little personal background, it may be helpful to engage an outside facilitator or consultant. For example, if the engagement strategy calls for the design and performance of a piece of reminiscence theatre, the community may be well-advised to engage the services of someone familiar with and experienced in working in applied theatre, who can bring their background and particular skill sets to the community in order to assist the community in accomplishing their goal.

In other circumstances it may be more appropriate to utilize someone from within the community to provide facilitation. In one-to-one interviews or small group facilitation, some of the Luther Court staff, skilled at listening and supporting the older adults have already gained the trust of these people. In this scenario it would be difficult for an outside facilitator to readily accomplish the task in the same way, though collaboration or co-facilitation may be possible. Similarly, there are some older adults within the community who would bring a very special character to facilitating an engagement strategy offering their gifts in service of the whole community.
It may at times be wise to utilize a hybrid approach, using a combination of in-house and outside facilitation. Sometimes it may depend if it is the first time the community has used a particular methodology or whether they have “practised together” through several iterations of the methodology. If the latter is the case, there may be someone within the community – staff, family member or older adult, who may be capable of providing the kind of leadership needed, now that they have had a chance to acquaint themselves with the process.

In any of the possibilities suggested, it is critical that the community is comfortable with those who are leading the process. It is important for the facilitator to not “get in the way.” The engagement strategy is not about providing a forum for the facilitator to shine, but rather is about providing a forum to meet the stated goals, which are measured and evaluated according to the benefit they bring to the older adult in the community at Luther Court.

It is also important to consider the kinds of supplies that will be needed for the engagement strategy exercise.

**Supplies/Equipment required.**

When the particulars of the engagement strategy are decided upon, a relevant question is what supplies or equipment will be needed to aid in its successful completion? Are there particular props that may be needed – items to stimulate memory, props and lighting to enhance the aesthetic quality of a play, practical pieces of equipment such as devices to help people to hear in small group conversations, adequate lighting, recording devices, food to celebrate, are just a few possibilities of what may be required. Consideration of these practical matters is essential to a well-planned strategy, and may also lend itself to a wonderful streak of creativity as people seek to provide the tools necessary to engage in a journey of discovery together.
With props and other supplies and equipment taken care of, the strategy will be more likely to succeed if a well-thought out plan or calendar of activity is put into place at the launch of the project.

**Calendar of Activity.**

A calendar of activity lists all the proposed activities that are scheduled to bring the engagement strategy to life. Attached to the calendar are dates and the announcement of location for the activity. This calendar will be flexible in that events will likely need to be added or deleted as the process unfolds, as new information becomes available and as the needs of the community with regard to the exercise become more fully known. It is important that the community members who are participating in the exercise have input into the setting of the calendar, and are kept apprised of dates and locations, and of any changes that occur. Giving people a chance to provide their input and keeping them up-to-date with regard to the exercise helps to build continuity and also helps to provide a sense of ownership for the participants. All of these factors, when carefully attended to, help to build in the possibility of success for the project.

There may be other pertinent information that is required for the engagement strategy, and each strategy will have different requirements based on the methodology chosen, the group of people that are involved in the strategy and the goal that is in view.

When the strategy has been planned and executed, the work is not yet complete. Now come the tasks of analysis and application.

**Analysis and Application of Data.**

Baker and Motton (2005) remind us that

> Interpretation is the process of moving from a summary of the data to explanatory thinking in a way that suggests paths for
action (Heron, as cited in Baker & Motton). It is helpful in this process to incorporate methods that point to similarities and differences in the data in ways that enable all partners to move beyond specific examples and toward underlying issues and meanings (Brydon-Miller, 2001, as cited in Baker & Motton). In this stage...it is also helpful to use multiple methods (verbal, written, artistic, and expressive) in order to engage all partners in the process. (p. 311)

To analyze the data gathered, moving to the underlying issues and meanings, allows for reflexivity between participation and action. The information gathered may be utilized in a number of ways. On an individual basis, the narratives of particular individuals, who are in complex care, for example, may be placed on their electronic medical record. This gives the staff members who are working with that person a greater understanding of who they are – and may be beneficial in creating a care plan for individuals that is informed by the stories that have shaped their lives. Or, it may point out an opportunity for individuals to participate in service in the community in a way that is resonant with their life experience and interests, and that may help individuals to unearth meaning and purpose in that service, rather than feeling they have nothing left to offer.

On a collective basis, there may be information pertaining to organizational change that comes to the surface and needs to be directed to the appropriate channel. For example, if the engagement strategy was constructed around Goal #2, concerning gathering data pertinent to the Luther Court Model of Care, any such resulting data would need to be referred to the Model of Care Committee (a standing committee of Luther Court) for dissemination and
implem

In this example, the facilitators of the engagement strategy and the members of the Model of Care committee would need to work closely together to ensure that the information was understood and that the resulting changes would result in reflecting the knowledge and understanding that arose from engaging the community themselves in the research. Equally important, is to pay particular attention to matters of communication. It will be essential to fully inform those who participated in the engagement strategy of the progress and implications of their study by demonstrating how the Model has been adjusted to include the information they have provided. Once the revisions are made, it will be also valuable to receive feedback from the research group participants to ensure that these revisions authentically reflect the knowledge and understandings that arose from the engagement strategy.

Baker and Motton (2005) in discussing the interpretation of data, suggest that although in theory it may be preferable to engage all of the participants in the CBPR project in interpreting the results, in reality there are often various levels of participation that occur at the interpretive stage. “However, in order to jointly interpret data, all partners have to learn the skills necessary to engage in this collective process of assigning meaning to the data. Even when presented with this opportunity, there may be some partners who are less likely to contribute at this stage” (p. 312). If the analysis is done by a person or persons within the whole group, the interpretation must also then be explained to the whole research group in a way that makes sense to them, and that allows them input to make adjustments where necessary. Baker & Motton conclude by saying that “regardless of the process used to make sense of the data, it is important to integrate the knowledge and understanding that community members have. This enables the development of local theory” (Elden & Levin, 1991, as cited in
Baker & Motton) and makes it more likely that actions taken based on the data will be appropriate for the community” (p. 312).

When the data has been analyzed and interpreted, and appropriate action has been taken with regard to the implementation of that knowledge, opportunity should be provided for reflection and evaluation of the engagement strategy. We turn now to consideration of the evaluation process.

**Evaluation of Engagement Strategy.**

The Engagement Strategy worksheet contains a list of questions that may be helpful to the community in evaluating the exercise in which they have participated in. In keeping with the principles of community-based participatory research, there may of course, be additional questions for purposes of evaluation that are raised and included. The questions that currently appear on the worksheet arise from the principles of community-based participatory research, outlined in Chapter 3. They include considerations of identifying the strengths and resources within the community and ensuring they have been utilized. They ask about the nature of the partnerships, and whether power sharing is evident that takes into consideration the inequities that may need attention. This is critical in a community, such as Luther Court, where, as already identified, there exists a wide range of specific challenges that could impede the participation of some members of the community. The process should reflect that these challenges have been considered and accommodated in a way that has allowed equitable participation. The evaluation asks the group to consider if there has been new learning and capacity-building identified, if there has been a suitable balance between action and reflection and critically, if the information that has been gathered, has been relayed to the appropriate persons/committee within the organization for follow-up and implementation. The evaluation process is a key component of the engagement strategy, particularly, because the strategy is an
iterative process. The evaluation will help to shape the next iteration of the exercise and as such will guide the ongoing research of the community. With the evaluation in-hand, the community can turn to a consideration of next steps that need to be taken to further and deepen the learning that may have occurred.

**Partnership Development**

The engagement strategy relies on a number of partnerships, both internal and external, which are integral to the process. As an engagement strategy moves into subsequent iterations, the group in naming next steps may identify new partnerships as being helpful to moving the process forward.

Internal partnerships include members of the community itself. Different parts of the community may be engaged, chosen in keeping with the particularity of each engagement. An important partnership may need to be forged with a committee or person in the organization that can help to advance the issue. Perhaps the Board of Directors needs to partner with the research group in order to understand the issue in a way that leads to appropriate policy revision. Other internal partners may include the Family Council, the Clinical Practice Committee, the Leadership Team, or a department such as the Activity department or the Nursing department.

External partnerships are also essential to the design of the engagement strategy. These partnerships may begin in the selecting of a facilitator/consultant to aid in the process. If students are identified as being part of the strategy, then partnerships with the University of Victoria, Camosun College and other learning institutions will be helpful. As Luther Court is an affiliate of the Vancouver Island Health Authority (VIHA), it is logical that some partnerships with VIHA occur, built on Luther Court’s existing long-standing partnership with
them. VIHA has an office of research that may be able to provide support and information. They may also be interested in the kinds of data collection that have been undertaken at Luther Court and want to engage in a joint research study with us.

Partnerships with consulting agencies, (e.g. applied theatre consulting firms such as TheatreWorks Consulting, the Victoria Conservatory of Music, BC School of Art Therapy etc.) can be initiated and will bring strength and particular skill sets to the table.

Funding partnerships are also an important area of consideration. Undertaking an engagement strategy has costs associated with it, and as Luther Court is a small, not-for-profit organization that relies on public funding for most of its operation, securing funds for projects such as this is a process that requires planning, foresight and hard work. Funding may be sought internally from the Luther Court Society Fundraising and Public Relations Committee. External funding partners may include the Vancouver Island Health Authority, charitable foundations, and service groups who have an interest in promoting programs which enhance the quality of life for older adults.

Partnerships that are sought out and nurtured over a period of time can bring great benefit to the ongoing process of using these methodologies. Relationships of trust can be established. And, in working together, there is a natural capacity-building that evolves, as you become aware of the strengths and skills that the partner brings to the process. Establishing ongoing relationships saves you time in that you already have an appreciation of what the partner brings to the issue-at-hand. Morello-Frosch, Pastor, Sadd, Porras & Prichard (2005) in their discussion of CBPR in the context of environmental justice in southern California, attest to the importance of building organic relationships between partners. In the context of their particular project they observe:
This collaborative was not convened in response to a request for proposals. The partners had already formed deep relationships through their prior environmental justice work in the South Coast region. This experience is not something that can be easily replicated, but it does suggest the importance of forming academic-community collaboratives proactively and scaling up those partnerships that are authentic and sustainable. (p. 388)

Partnerships, both internal and external to the Luther Court Society lend a multi-faceted and richly variant range of possibilities to the research of the community. Careful consideration of the role of partners in each engagement strategy will strengthen and influence the outcomes achieved.

We look now to a further examination of process as it results in policy change or action alternatives.

**Policy Changes/Action Alternatives**

The engagement strategies are designed not so much with a view “to fix” the issues that emerge from the research, but to engage in a process which in and of itself will open a new way of seeing, a new way of being in the community that may propel older adults to be heard differently in the community and staff working in the community to practice differently. May (2007) in her discussion of a community-based theatre project reminds us that “...the efficacy of community-based theatre lies precisely where it is seldom measured – in process” (p. 156).

A key element of the process will be to identify those voices/viewpoints that may be missing and also to give weight to those viewpoints that are sometimes overlooked because they come from those with less power in the organization.
As we learn from the knowledge gathered and created in the engagement strategies, we will begin to apply that knowledge in creating opportunities for a deeper engagement in the community, coupled with a deeper understanding of the life journeys that have moulded and shaped those who constitute the community. Maintaining close ties between those working on the engagement strategies and those people within the organization responsible for the areas the research touches upon, will be critical in terms of implementing the information and realizing the link between research and action. It is impossible to say where that learning may take us. But as the organization is able to be responsive to and to organize itself around the information that is generated, positive change is possible, that will enable people to live in community to their fullest potential, thereby enhancing their quality of life.

Summary

In this chapter, I have identified three goals that rise out of the research and methodology outlined in Chapters 2 & 3, and within the context of the Luther Court Society as identified in Chapter 1. In order to provide a vehicle to achieve these goals, an engagement strategy process is developed and discussed. The Engagement Strategy Worksheet sets out the key elements of the design – and is purposefully open-ended to give space and opportunity to work in a number of different settings, using different methodologies and with a variety of partners. The engagement strategy provides a working model for how the Luther Court Society can assist older adults to engage in narrative reflection in a way that is life-enhancing and meaningful and furthermore, how that information can be utilized in care-planning, in volunteer development within the organization and in refining and developing the Luther Court Model of Care, Life Together, as a collaborative, interactive process.
In Chapter 5 I shall discuss further implications of implementing the engagement strategy design, and suggest some areas that require additional reflection as we look to support older adults in successful aging and as we seek to be enriched as a community by joining in the journey together.
Chapter 5: Action and Reflection

*I beg you...to have patience with everything unresolved in your heart and try to love the questions themselves as if they were locked rooms or books written in a very foreign language. Don’t search for the answers, which could not be given to you now, because you would not be able to live them. And the point is to live everything. Live the questions now. Perhaps then someday far in the future, you will gradually without even noticing it, live your way into the answer.* (Rainier Maria Rilke, Letter 4)

One of the many gifts that have been given to me throughout the course of working with older adults over a long period of time is not only to hear the stories that have shaped their lives, but to hear them *reflect* upon those stories in a way that gives expression to a deepened understanding of life. Such reflection is born out of a lifetime of experience, of a lifetime that has likely included struggle and hardship; joy and fulfillment. For some people, whatever their life journey has been, even when it has included seemingly overwhelming obstacles and loss (and often it seems, especially in these instances), these remarkable individuals still manage to say a resounding “yes” to life and to live it with all the resources they can muster. This kind of vitality is not vested in physical health – often the story-teller is frail and the simplest of tasks such as getting dressed or walking down the hall can take all of their physical energy. But what we are talking about is not physical strength, but a strength or vitality of the spirit. Whenever I have spent time in the presence of someone who possesses this vitality, it gives me courage for my own journey of aging. Atchley (2009) relates similar experiences and refers to these people as “sages....They had a vitality and presence that I admired. ‘I want to be like that when I’m old,’ I thought” (p. 158).
The task is to invite more people into the journey of discovery that arrives at this point of vitality. Quinodoz (2008), writing from the perspective of a psychoanalyst, talks of growing old as a work of art:

There are things in our past and in our future that we cannot change, but with the material that we have there are many things we can construct. Some people, by inventing their present time manage to modify the meaning of their past and of their future, even though the actual facts remain unchanged. Their life becomes a work of art in the sense that Hanna Segal uses the expression in a paper from which an extract can be found inscribed on the monument at Ground Zero, New York:

It is when the world within us is destroyed, when it is dead and loveless, when our loved ones are in fragments, and we ourselves in helpless despair...it is then that we must re-create our world anew, re-assemble the pieces, infuse life into dead fragments, re-create life. (p. 92-3)

Reminiscence and life review provide a mechanism to bridge what has been experienced in the past, bringing those narratives into the present to provide a frame of reference for making sense of today. The stories gathered are one way to connect past experience with present reality in a way that provides a way forward for a hope-filled future. Atchley (2009) has undertaken a longitudinal study encompassing 1300 people ages 50 or older over a span of 20 years, wherein he measured “internal continuity of ideas and external continuity of activities and relationships
as respondents adapted to aging” (p. 110). One observation with regard to continuity that Atchley makes is, “Using continuity strategies to pursue goals and adapt to change does not necessarily lead to successful results, but if we take life satisfaction as a measure of success, then continuity is usually a successful adaptive strategy” (p. 111).

The engagement strategy outlined in Chapter 4 gives one framework to explore issues of continuity in a way that may be useful to the Luther Court Society in its journey to understand aging in all its complexity, and to support in tangible ways the experience of people who are aging in a way that is life-enhancing.

The narrative journey is not a straightforward or formulaic one. It invites us, as Rilke suggests, “to love the question”. I turn now to a few final considerations that pertain to this engagement strategy, some as words of caution, others as words of possibility, as the question remains in our minds and in our practice and even in our bodies.

**Considerations of caution and possibility**

In Chapter 2 I cited Highfield and Cason (1983) as identifying four basic spiritual needs; the need for meaning and purpose in life, the need to give love, the need to receive love and the need for hope and creativity. The methodologies of narrative inquiry, arts-based inquiry and reminiscence theatre discussed in Chapter 3 provide some tools for us to explore the narratives of our lives which in and of themselves hold promise for meeting the expressed spiritual needs. In this exercise of seeking, how very important it is to see people as whole. Throughout the life cycle, the experience of catching a glimpse of someone and assuming that glimpse is representative of the whole is always an experience fraught with danger. First impressions can be deceptive and if left unchecked, can distort our experience of another person, or another
culture or another reality. This is particularly so when people experience some critical losses – loss of hearing, loss of vision, loss of mobility, loss of memory. We look at the person and see the loss and we forget the whole life that is encapsulated in this person – and see just the present hardship. One of the great challenges to successfully advance the engagement strategy will be for all involved to commit to looking beyond the surface – to truly engage one another in a journey of discovery wherein both weak and strong have much to offer – and both learn and grow in the exercise. Buchanan & Middleton (1994) suggest caution in outlining the dilemma that arises between serving and supervising:

To take care of someone is to serve them by providing for their needs. At the same time, care involves management and supervision. To have someone ‘in your charge’ is to be ‘in charge’ of someone. In the process of providing for a person’s needs, the provider assumes control, and this places the person provided for in a potentially dependent and subordinate position with regard to the provider. The dilemma is that in the very act of giving, care provision potentially erodes autonomy and personal freedom. (p. 68)

This is no small matter – and another area where the question must remain before us to inform our practice. Involvement in the engagement strategies call for an examination of any remnants of an authoritarian care dynamic. Buchanan & Middleton further suggest that “reminiscence is presented as anti-authoritarian – it is subversive and unsettling – it challenges management practices, it may lead to the discontinuation of prevailing regimes. It is an instrument of equality, by which relationships of differential status – ‘carers’ and ‘cared-for’ ‘staff’ and ‘older
people’ – may be recast as equal relations between people” (p. 68). True engagement in these exercises will require self-examination on the part of all participants with a willingness to look at matters of power distribution, coupled with an understanding that those who engage in a relationship of care-giving are as apt to benefit from the encounter as those who are the recipient of the care. Here again, the philosophy of servant leadership as outlined in Chapter 2 may provide a way forward, particularly with regard to the insights of Sergiovanni (1992) and his discussion of followership. In that discussion he cautions that the leader may be tempted to define the needs of those served. However, he concludes it is always best to let those who are served “define their own needs in their own way” (p. 125). And if both are focussing on serving common values and ideas, they will find that they are joined together in a common pursuit of service.

Examining the dynamic of the care relationship calls therefore for self-reflection and the identification of unnamed barriers that may arise. Nouwen & Gaffney (1974) provide the following insight:

How can we be present fully for the elderly when we are hiding from our own aging? How can we listen to their pains when their stories open wounds in us that we are trying to cover up? How can we offer companionship when we want to keep our own aging self out of the room, and how can we gently touch the vulnerable spots in old people’s lives when we have armoured our own vulnerable self with fear and blindness? Only as we enter into solidarity with the aging and speak out of common experience, can we help others to discover the freedom of old
By welcoming the elderly into our aging self we can be good hosts and healing can take place. (p. 98-9)

As all who engage in the process do so in the recognition that we are gathered around a common goal, about the task of discovering what it means to age well, there will need to be a commitment to looking to each other as whole persons – for those who are younger, embracing their aging self, for those who are older, incorporating their younger self. And in this process, both can be intent on serving the other in a journey of mutual self-discovery.

Caution should also be exercised with regard to the data gained from the engagement strategies. The researchers will want to avoid simple generalizations that mask the true value of the data. The learning that arises from any one engagement will want to be held against the learning that happens in subsequent iterations of the tool, or against concurrent iterations that are being conducted elsewhere in the community. There may be some lessons/challenges/etc. that rise to the surface that may pertain particularly to one individual in a particular circumstance. To utilize that data in terms of revision of policy and practice for the whole community may in fact distort the value of the information. Careful discernment should be utilized. Bornat (1994) asserts

If reminiscence work is to retain its position as empowering and enhancing...then an essential component of the skill base for practitioners must be an awareness of advocacy and a valuing of diversity in the lives of older people. While reminiscence can clearly become a basis for self-advocacy for those with great mental frailty, as a process it must begin with consent and
genuine participation. And, while reminiscence work enables the recognition of shared experience and helps to build collective ties, it must always sustain an ability to differentiate experience and to value that individuality which guarantees esteem and understanding in old age. (p. 7)

Certainly, having established that the data gained from the engagement strategies should be handled with respect and critical judgement, at the same time it holds several possibilities for advancing the work of a community intent upon providing an environment conducive to living fully until one dies.

The data can be of great benefit in informing the use of the Luther Court Model of Care. The learning may be in terms of suggesting new categories or revising and renaming the categories that are there. However, based on current evaluations of the Model and its usefulness as a way of intentionally marrying practice with values, it is more likely that the description and understanding of the categories will be enhanced. What does it mean to really feel “at home”? What does it mean for the care and services provided to truly be “person-centered”? What is it about the nature of community that enables it to be supportive, vibrant, a reality that people want to be a part of? What kind of a team best supports and makes living fully possible? And how are ethics understood and lived out in a way that is visible and transparent and that is part of the everyday fabric of the workings of the community? To continue to live with these questions – to love the questions as they work themselves through a thoughtful and dynamic process, that defies standing still with them, may lead to ongoing discovery.
The data may also be useful in helping to define areas of service that can be opened to the older adults in the community.

Because joy in the act of serving comes to be its own reward and doesn’t depend on social acknowledgement, it is available all the time...Years of being on a path of service leads to an understanding that every contact with every thing can be an opportunity for service, so we don’t have to worry about opportunities. We may have long-term service commitments we are willing to make, but we also are awake to opportunities that spontaneously arise to be helpful. To know what is needed, we must clearly see, which is very much a spiritual practice...When we are committed to service, we see opportunities everywhere and we don’t have to be preoccupied with whether we have the ‘authority’ or are ‘required’ to serve. (Atchley, 2009, p. 114-5)

Creating a culture that encourages service opportunities for older adults requires a re-framing of attitude and approach. Again, we must see each other as whole, and needing to fulfill basic spiritual needs of having meaning and purpose in our lives, to give and receive love and to find hope and creativity. It is hard to fulfill those needs if the older adult is cast into the position of only being able to be recipient. When we fail to recognize and realize the potential for them to give of themselves, in spite of present frailty, we hold people back from that which can provide joy and hope that is grounded in tangible experience.
These possibilities await exploration, and may only be the surface of the potential that exists as a community engages in creating knowledge together.

In summary, then, I turn to a review of the substance of this project.

**Project Summary**

The project sets out the dialectic of the human desire to live one’s life to the fullest, to its conclusion, in a way that brings meaning and purpose, set against the challenges of aging and the fear and avoidance of growing old. The context for these questions in this project rises out of the particularity of the community of the Luther Court Society, where I serve as the Executive Director. The community operates within a unique Model of Care, that the Society has developed as an intentional tool to wed everyday practice with the stated vision, mission and philosophy of the Society. With a view to enhancing the quality of life for those older adults that live at Luther Court or partake in its programs, the project includes a design for an engagement strategy that may be useful in advancing the goal of enhancing the quality of life for older adults by gaining and creating knowledge in a community-based participatory research framework.

To prepare the way for the design of the engagement strategy, a review of the literature was conducted, specifically in the areas of aging, health, and social engagement and in the area of servant leadership. Key findings were that longevity of life has been demonstrated to have a positive correlation to the frequency of social contact, participation in religious activities and volunteerism. These findings led to further investigation with regard to social integration, spirituality and volunteerism as it pertains to older adults. Servant leadership provided a helpful paradigm for looking at the nature of service and the implications of service for older
adults and for those younger adults who are in relationship with them, be it service-related or otherwise.

Methodologies were then explored as to how the understandings put forward in the literature review or theoretical framework of the project, could be translated into research and action to address the questions arising in the context of the Luther Court Society. Within the broad framework of community-based participatory research, methods of arts-based inquiry were explored with a particular emphasis on narrative inquiry and reminiscence theatre. Methodologies that embody the arts were found to be particularly useful because of their ability to address the multiple dimensions of being human – physical, emotional, spiritual, social and cultural – and provide a wide palette of options for engaging with the world around us, orally, visually, with our whole bodies – choosing the best medium for the situation and the participants involved (Cole and Knowles, 2008). More traditional approaches to knowledge creation and extraction rely heavily on language which becomes as Eisner (2008) observes, a “representational vehicle” to carry all the observations. The problem as Eisner goes on to elucidate is that all of human experience cannot be reduced to language (p.5). This observation is particularly critical in a community of older adults, some of whom live with physical and mental challenges. To offer the means to explore their experience, using as many ways of addressing the human person as possible, opens up the possibility of finding the right tools for the particular circumstance-at-hand. Visual images, music, drama, or other such mediums may evoke responses that words alone cannot. Reminiscence theatre was particularly explored as a method that holds promise for engaging the community at Luther Court in a way that may help to move the goals of this project forward.
The engagement strategy is outlined in Chapter 4. The chapter begins by stating some goals that arise out of the research of this project and then proceeds to set a process in place whereby the engagement make take place. Objectives for each strategy are drawn whose purpose is to achieve the aims of the stated goal. The methodology is chosen, participants named, consultants appointed as necessary, the requisite equipment sought and a calendar of activity is mapped out. When the activities have taken place the data is analyzed and where appropriate, action is suggested. Care is taken to be in close dialogue with persons or committees within the organization’s structure to facilitate clear communication and to ensure that the research gathered is understood and can be acted upon, when it is within the best interests of the community as a whole. The engagement strategy also has evaluation as an intrinsic part of its content. The engagement strategy is open-ended and designed to be an iterative process. The community is given a fair amount of latitude as to what the objectives are, what methodology they will use, and so on, remembering that in community-based research the process is meant to be collaborative and empowering and belonging to the community itself.

Chapter 5 provides some additional information, some words of caution but also some possibilities are held up for consideration of work to be initiated that has the potential to address the organization’s ongoing need and desire to support older adults in ways that bring meaning and purpose and which enhance their life-satisfaction.

Conclusion

The image of a journey has been used frequently throughout this project. The journey is celebrated for what it is, in and of itself. More about the people we meet, the relationships we foster, the experiences we have, and ways that we can serve one another and less about the destination at the end. The image of the journey reminds us that joy and understanding emerge
in the traveling. The journey of aging begins the day we are born. It is different for every person, but it holds some common ground. It is something we don’t always understand and therefore humans have often attached fear to the natural process of the aging of our bodies and minds. That fear can immobilize us and rob us of the great gifts of the journey. For when we can journey, unfettered by fear, our lives begin to make sense on an individual basis as we are given the gift of perspective and experience, and collectively as a people, we begin to use that way of knowing to help us to tell the top from the bottom, as the Balinese legend (quoted in chapter 1, p.11-12) suggests. We need some maps for the journey – maps which help us to avoid the treacherous road which takes us to a place of boundaries and division – boundaries between the “strong and the weak, the helpers and the helped, the givers and the receivers, the independent and the dependent” (Nouwen & Gaffney, 1994, p. 153) and instead direct us to a road where “we share the joy and the responsibility of serving and caring for all” (Luther Court Philosophy Statement, 2010, Appendix B).

Nouwen and Gaffney suggest:

Aging is one of the most essential human processes, one that can be denied only with great harm. Every man and woman who has discovered or rediscovered his or her own aging has a unique opportunity to enrich the quality of his or her own life and that of every fellow human being. (p. 154)

We have some tools for the journey, we have some charted and some uncharted territory to cover, we know that there are treasures waiting to be uncovered, and most of all we travel with each other as companions for the journey.
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Appendix A: Vision & Mission Statements of the Luther Court Society

VISION STATEMENT
Inspired by our mission, and guided by our values, model of care, our code of ethics and the British Columbia Residents’ Bill of Rights, Luther Court Society proactively plans for and responds to the future needs of seniors in a changing society and health care environment.

MISSION STATEMENT
In compassionate Christian love, the mission of Luther Court Society is to sustain and improve the quality of life for seniors, to meet their changing needs by providing a safe environment for care, shelter, support, and community interaction.

Approved November 26, 2003
Appendix B: Philosophy Statement of the Luther Court Society

PHILOSOPHY

Grounded in compassionate Christian love, we believe:

- all people deserve to be treated with compassion, dignity and respect, regardless of their circumstances;
- all people have the right to informed decision-making, freedom of expression, and individuality, within the context of Community;
- each person is a unique blend of strengths and needs;
- we share the responsibility and the gift of serving and caring for all.

Therefore we will:

- provide professional standards of care in a caring and comfortable environment;
- provide pastoral care to support and foster human dignity through the promotion of independence, respect for privacy, enhancement of individuality and community;
- provide support for the physical, intellectual, and emotional well-being of each person;
- provide opportunities for socialization, personal growth, learning, and skill development and Community building;
- involve family, friends, and the community.

Honouring our belief statement requires positive participation from Board, Staff and Volunteers by:

- treating all people fairly, honestly, authentically and respectfully;
- supporting and caring for one another;
- working together as a team;
- engaging in ongoing evaluation of our services and taking advantage of opportunities for improvement and innovation;
- being accountable for the wise stewardship of our resources.

Approved by the Board of Directors February 1997
Revised/Revised May 2006; May 2010
### Appendix C: Luther Court Model of Care (Matrix)

**LUTHER COURT MODEL OF CARE: Life Together**

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<tr>
<th>PHYSICAL ENVIRONMENT</th>
<th>HOME</th>
<th>ETHICS</th>
<th>PERSON-CENTERED</th>
<th>COLLABORATIVE TEAM</th>
<th>CARING COMMUNITY</th>
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</thead>
<tbody>
<tr>
<td>Creating the Physical Environment of Home</td>
<td>Acting Ethically</td>
<td>The Person Living in the Centre</td>
<td>Spaces to Collaborate</td>
<td>Spaces to Gather</td>
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<td>Home</td>
<td>Space adapted to need</td>
<td>Personal choice</td>
<td>Appropriately work and play spaces</td>
<td>Common spaces – village</td>
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<tr>
<td>Safety &amp; security</td>
<td>Law abiding</td>
<td>Safety &amp; security</td>
<td>Communication systems</td>
<td>Private spaces – home</td>
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<td>Appropriate to need</td>
<td>Balance cost &amp; need</td>
<td>Quiet</td>
<td>Electronic medical systems</td>
<td>Easy accessibility</td>
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<td>Privacy</td>
<td>Healing environment</td>
<td>Individual control of privacy</td>
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<th>Organizing the Home</th>
<th>Ethic in Everyday Life</th>
<th>The Client at the Centre</th>
<th>Creating Collaborative Teams</th>
<th>Strengthening Community Presence</th>
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<td>Staff as family</td>
<td>Policies support Model</td>
<td>Policies on supportive nutrition practices</td>
<td>Passion</td>
<td>Expand, modify village services</td>
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<tr>
<td>Families and friends included</td>
<td>Ethical assessment tool</td>
<td>Policies on supportive activities</td>
<td>Commitment</td>
<td>Prevent “silos” of programs</td>
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<td>Non-institutional approaches</td>
<td>Ethics as everyday practice</td>
<td>Personalized care plans where needed</td>
<td>Communication</td>
<td>Focus on wellness</td>
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<td>Wellness rather than illness</td>
<td>Ethics committee</td>
<td>Holistic practices</td>
<td>Best practices</td>
<td>Clients &amp; staff participate in all programs</td>
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<td>Embed the model</td>
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<td>Enhance or maintain function</td>
<td>7 Characteristics Model</td>
<td>Supporting intergenerations</td>
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<td>Hiring practices reflect the model</td>
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<td>Model</td>
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<th>CULTURE</th>
<th>Safety &amp; Autonomy</th>
<th>Living Ethics</th>
<th>Doing “with”</th>
<th>Enabling the best in everyone</th>
<th>Building an Empathetic Community</th>
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<td>Individual as unique</td>
<td>Advocates for the most vulnerable</td>
<td>Family &amp; friends included as client</td>
<td>Sharing the gift of serving and caring</td>
<td>Enhance village &amp; home</td>
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<td>Reflects mission &amp; vision</td>
<td>Transparent decision-making</td>
<td>Support individual control &amp; decision-making</td>
<td>Clients, families, volunteers, staff, partners as community</td>
<td>Enable a faith-based life</td>
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<td>Climate of respectfulness</td>
<td>Living ethically</td>
<td>Compassion</td>
<td>Climate of compassion, dignity &amp; respect for everyone</td>
<td>Enhance seamlessness</td>
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<td>Transparency</td>
<td>Welcome collaborative input from all sectors</td>
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<td>Support differences</td>
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<td>Personal spaces are sanctuary</td>
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Appendix D: Luther Court Model of Care (Framework Statements)

LIFE TOGETHER
A MODEL FOR CARING COMMUNITIES

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At Home

One of our most basic needs is to have a place wherein we are truly “at home.” At their best, homes reflect the individual character(s) of the person(s) who live there, are a place wherein families ties and friendships are nurtured and are a space (both physically and emotionally) where a person feels free to be fully themselves. The Life Together Model encourages physical spaces to be home-like in appearance, free of institutional reminders (e.g. overhead paging, nurses’ stations, med carts etc.). They are places where clients, families and staff feel free to come and participate as members of an active and vital household. Creating a home in a communal setting, involves active listening, history-taking, a respect for differences and allowance for individuality, as well as a recognition of the universal human need for support, validation and companionship.

Ethically Based

A community embraces a set of values which are set forth in vision and mission statements. Such statements should reflect clear ethical principles. All aspects of the community related to its physical environment, organizational structure and culture should be congruent with its mission and vision, and all decisions made must be able to stand up to the scrutiny of ethical assessment. The Life Together Model calls for a strong ethical framework to be intrinsic in everything that takes place in the community. An ethical assessment tool is used to assist in making challenging decisions. Decision-making takes into consideration the needs of the client, staff and other community members to ensure that decisions serve both the individual and the common good. Decision-making processes need to be as transparent as possible to achieve the outcomes of an ethical culture. And, decisions are always strongest when they are arrived at following a fruitful process of collaborative contributions from clients, staff and pertinent community members.

Person-Centered

The Life Together model places the resident at the centre and strives to honour client and family choice. In practical terms this means that clients are encouraged (within the parameters of safety) to bring in their own personal effects. Pets are allowed to visit. Care and activity plans are built to uniquely fit the lifestyle and background of the individual. For example, there will
be flexibility in meal times to accommodate early birds or late risers. Clients have the freedom to choose their own dining partners and the celebration of special events – personal, cultural or religious will be encouraged within the community. Client histories and family input are essential to ensure that a person-centered focus is in operation. A careful balancing of individual needs and the needs of the community is maintained.

Collaborative Team

We share the responsibility and the gift of serving and caring for all in a community environment. A strong, healthy and engaged team is absolutely essential to the Life Together model of care. Spaces and practices are designed to enable effective communication among all team members. Staff work to full scope of practice incorporating the Best Practice standards of care in order to provide competent, timely care. A collaborative, interdisciplinary approach is fostered among all members of the care team. Educational opportunities are provided and encouraged as well as opportunities for applicable education off-site. The team is comprised of anyone involved in supporting and providing care, including volunteers and members of the client’s family. The Life Together Model enables a climate of empathy, dignity and respect for all persons regardless of their circumstances.

Caring Community

A community of care encompasses both home and village spaces to nurture regular engagement with others. The home space is where we engage in such activities as eating our meals, sleeping, bathing, participating in small group activities. The village space is where we go to engage in such activities as to hear concerts, go to church, get our hair done, or transact business. A seamless movement between these spaces within the community is fostered by intentional organizational practices. Programs are open to all parts of our community – and participation is based on suitability for particular client, and not on which part of the community of care they are part of. Clients, family, staff and volunteers are included in a collaborative way as an inherent part of the community. Community building is practiced in an intentional way, and a sense of inclusion and hospitality is inherent in everything that happens within the community.

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