



# OCCUPATIONAL NARRATIVES OF PEOPLE LIVING WITH RA

workshop



## Why are we looking at this topic?

- We are *occupational* therapists
- We listen to *stories* about daily life all the time
- Narrative research within health care is well established

- **How are we going to do this?**
- Mixture of individual work, group work – role play and presenting research findings
- **Structure of workshop**
- Look at occupations
- Look at narratives – in research terms and then in clinical terms
- Look at current research findings
- Close with discussion

## Aims of the workshop ( from my perspective):



- Consider what we mean by Occupations
- Think about use of narratives in research
- Consider importance of narratives in our patient contacts

# OCCUPATIONS



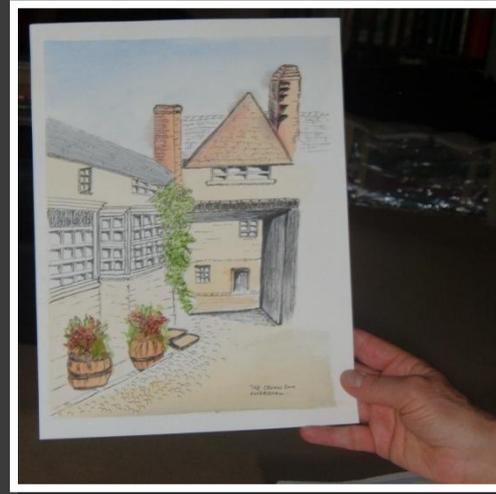
Self care, productivity and leisure.....?



## First activity of the afternoon

- Write down *your* occupational story...
- Turn to your neighbour and tell them your story....

# WHAT ARE NARRATIVES?



- *“stories function to alter the way we view the mundane, everyday events. Stories can indeed accomplish change”* (Reissman 2008 p 63)

# Use of narratives in research

- Social science and medical sociology
- Medical anthropology
- Occupational therapy literature

Move away from the passive respondent towards the active participant.

## 2<sup>nd</sup> Activity

Work in three`s: Role  
play

# FINAL PART OF THE WORKSHOP



# LIVING WITH RA – 5 INDIVIDUALS

- Key themes to emerge
  1. Changing occupations
  2. Environmental factors count
  3. Taking control over occupations
  4. Complexity of occupations
  5. Being or becoming `normal`
  6. People and objects matter
  7. Hopes and dreams matter

# 1. Changing occupations:

Re-engaging in previous occupations, and taking on new:



*“the 2 hours just flies by, in the blink of an eye. Its relaxing...its rewarding..it`s fun as well...I really, really, really enjoy it...my paintings aren`t brilliant, but I get a satisfaction out of it” Ann*



*“I`ve started doing cross stitch ..I donne wanna be sitting around doing nothing all day, it`s better to be occupied...I don`t knit no more, not since I`ve had my stroke” Betty*

## 1. Changing occupations:

Shifting the entry point to the occupation:

*“ just before I was diagnosed I shovelled 6 tonnes of gravel....things like that have gone by the wayside...but there`s other ways of participating.” Ann*

## 2. Environmental factors count:

Creating a unique  
environment:

*“ it`s not like swimming in a pool  
or anything...I do it cause it`s  
just really nice to be in the  
water...just surrounded by the  
trees...with ducks and  
things..it`s just lovely....there`s  
such an incredible feeling of  
well being afterwards...it`s just  
incredible” David*

### 3. Taking control over occupations:

#### Creative agency

*“I`m probably a bit more positive about it because my body...I do quite a lot of these physical things that are kind of to do with, you know, using my body...whereas 5 years ago would never dream of...getting into town under my own steam, I would have gone in the car or the bus or the train..now I get there under my own steam and that`s my body doing that”*

David

### 3. Taking control over occupations:

problem solving for themselves:

*“I’ve sourced a pen that really suits me...I went through all the arthro pens and none of them suited me...I thought they were absolutely rubbish...I don’t know how people use them...I use a traditional, it was a market (pen)” Ann*



## 4. Complexity of occupations:

Multiple meanings eg gardening, tied in with bird watching and enjoying glass of wine on the patio with hubby...

*“I`m home by twenty past four...then we sit out here with a glass of wine...it`s lovely, it`s relaxing, it`s beautiful..I like all the trees...you get the birds in the garden, and we`ve got a racing pigeon that`s appeared...we`ve got wood peckers..I often see wood peckers”*  
*Lisa*



- 4. Complexity of occupations:
- Work matters, objects matter, work as therapy...
- *“I am absolutely 100% positive that work helps..work helps because it gets you up in the morning, it makes you have a shower, it makes you..get yourself to work and do something...you have to do it... and you have to think about something else...at all costs I get myself to work” Lisa*
- *“I’ve gone to work through thick and thin...I absolutely love my job, I absolutely adore it....I suppose it’s a big part of my life. It’s a very positive job...I give people positive affirmations to stick up in the bedroom..because I know they work that’s not part of the*

## 5. Being or becoming again `normal`:

*“if you walked into my house, you wouldn't think there would be any...you wouldn't see anything in my house that would determine me as someone with any problems” Ann*

*“in terms of the arthritis I tend not to tell people about it ...I really don't want to be... labelled in that way...and maybe that's a kind of denial as well, but most people probably wouldn't ...I've told close friends and family..about it, but, eh, most people wouldn't be aware of it and I don't think I show, I mean I don't look like someone with arthritis, I don't know..” David*

## 6. PEOPLE MATTER

Co-dependency works:

*“oh yes, me and Gina have lived together for 28 years, we do everything together... I gets myself washed and dressed alright, and I make a cup of tea...we like cooking...I do bits and pieces...(G) you choose the recipes..(B) opening a packet of biscuits is really tricky...I asks Gina to do it..” Betty*

## 6. Hopes and dreams count :

*“there`s just things that I want to do...and the arthritis might get in the way of that...I used to do a lot of hill walking....and you know how these things get squeezed out of your life cause you`re busy...I`ve tried to make more time for that kind of thing...taking up cycling as well and swimming” David*

# CONCLUSION :

## POINTS FOR DISCUSSION?

- What have you have learnt from this session?
- How do you think this is relevant to practice?
- Will you change anything about your practice?
- Any other comments welcome!