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# Storytelling as Languaging: The Case of Jane

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**Abstract**---This paper presents the findings of a case study, which aims to answer the question of whether languaging (i.e. storytelling as a cognitively demanding talk) can improve the cognition of an older adult suffering from multiple sclerosis and living in a long-term care facility. Languaging, the process of using language to make meaning, evokes the views of Bakhtin and Vygotsky on language as a dynamic, heterogeneous and dialogic construct that mediates our relationship with the outside world and, most importantly, shapes our minds in the process of communication. We analyzed the structure of the 10 audio recorded and transcribed sessions between the researcher and the participant for the stories. Focusing on one of the stories told by Jane, the participant, and to the researcher, the analysis shows that Jane was capable of engaging in a cognitively demanding task of telling the story. By doing this, Jane restored her relationship with the outside world; the act of storytelling “pushed” her to produce a more complex language and facilitated a positive cognitive and affective change.

**Keywords**---dialogic construct, dynamic construct, heterogeneous construct, languaging, storytelling.

**Introduction**

This paper presents the findings of a case study, the purpose of which is to answer the question of whether languaging (i.e. cognitively demanding talk) can improve the cognition of an older adult suffering from multiple sclerosis (MS) and living in a long-term care facility (LTCF). According to Swain (2006), languaging is the term that has been used “to refer to the activity of mediating cognitively complex ideas using language” that evokes “a process rather than a final product” and “reminds us that producing language – that is, speaking and writing – are themselves activities that mediate remembering, attending and other aspects of
higher mental functioning”. The term languaging as a “never ending process of using language to make meaning” Swain (2006), reflects the views of Bakhtin and Vygotsky on language as a dynamic, heterogeneous and dialogic construct that mediates our relationship with the outside world and, most importantly, shapes our minds in the process of communication. For the purpose of this paper, we view storytelling as a form of languaging that mediates positive cognitive change.

The ideas developed by Bakhtin and Vygotsky Bakhtin (1981); Vygotsky (1987), guided our research on the relationship between storytelling, as a form of languaging, and cognition. We hypothesize that languaging can lead to a positive cognitive change because of the properties inherent in language discussed by Bakhtin; specifically, Bakhtin’s ideas about the social and dialogic nature of the utterance, its heterogeneity and its addressivity towards the other. According to Bakhtin, “any understanding of live speech is inherently responsive” Bakhtin (1986), and this responsiveness presupposes active participation of the speaker and the listener in a dialog that can lead to a new level of awareness and understanding. For the purpose of this paper, Bakhtin’s ideas about the dialogic nature of the utterance are complemented by Vygotsky’s views on the inseparable nature of a thought-and-word relationship, where “the structure of speech is not a simple mirror image of the structure of thought. Thought is restructured as it is transformed into speech. It is not expressed but completed in the word” (Vygotsky, 1987). In other words, language can mediate thinking and as a result, facilitate the development of higher mental processes.

Data collection

The data presented and analyzed in this study were collected within the context of a larger study that investigated the effects of languaging on the cognitive functioning of isolated older adults (Swain & Lapkin, 2013). Jane is one of the 5 participants selected for this study. In order to demonstrate a positive change in Jane’s cognitive functioning, i.e. Jane’s ability to remember a series of events from the past mediated by storytelling, we analyzed the structure of the 10 audio recorded and transcribed sessions searching for the stories. We identified storytelling as a cognitively demanding task that requires a logical beginning or a preface, and that can be initiated and produced in response to a similar story in real conversation time. In addition, a story requires a certain type of vocabulary that is constrained by the topic and the ability to hold the floor for a number of turns (Sacks, 1992). For the purpose of this paper, we will report on some of our findings that demonstrate the relationship between storytellng and cognition, including the evidence of a positive effect that storytelling as a form of languaging had on the cognition and sense of well-being of the participant.

The participant

Jane, a 75-year-old participant of the study, has been living in an LTCF called Magnolia Place. Although diagnosed with MS, she was chosen for the study because she was not considered as having any severe cognitive impairment. According to the Mini Mental State Exam (MMSE), a widely used clinical instrument for detecting and assessing cognitive impairment, Jane received a score of 24 out of maximum of 30 that indicates mild dementia. In addition, she
was identified by the personnel of Magnolia Place as socially isolated and not visited by her family members on a regular basis. As a resident of an assisted living facility, she has the opportunity to interact with its staff. However, the modified language used by caretakers known as Elderspeak (Kemper et al. 1998), characterized by simplified syntax and slower speech, cannot be considered cognitively demanding. As the purpose of the sustained intervention was to engage Jane in cognitively demanding talk, in this case languaging in the form of storytelling, we examined its effect on Jane's cognitive functions as well as her sense of self-esteem and well-being.

The story of Jane

Jane was born in Latvia and immigrated to Canada after WWII where she got married, had four children and had a job as a hairdresser, and later as a secretary in one of the government agencies dealing with the issues of subsidized housing. During her life, she experienced a severe trauma when two of her sons died of AIDS. Her suffering was deepened by the fact that her husband was homophobic, and the only support that she had counted on at that time was her deep belief in God. Later in her life, Jane was diagnosed with MS. In session 4, she sadly confessed to the researcher, “I've lost my mind. I keep forgetting things” (4.78). At the time of the sessions, she lived an isolated life, rarely visited by her daughter and her son and was not communicating much with the staff and residents of Magnolia Place who see her as a confused person and as a person who lost her mind. Excerpt 1 demonstrates Jane's reluctance to ask the personnel of the LTCF for help because she does not want to be perceived as a woman who is “confused” (10.451), as she was described by one of the staff members.

Excerpt 1 (Session 10)2. “They will think I’m nuts”

10. 22. R. : Uh, what... do you know what it looks like? Should I ask the nurse to?
10. 23. J. : No=
10. 24. R. : =No?
10. 25. J. : No. They will think I’m nuts.
10. 26. R. : They what?
10. 27. J. : They'll think I’m nuts.
10. 28. R. : They’ll think you are nuts.
10. 29. J. : How come I don’t know what I’ve lost?

The most amazing fact about Jane is that despite all the difficulties and emotional traumas she experienced throughout her life, she was capable of laughing at them. Her irrepressible sense of humor could be found, for example in the following excerpt, where Jane talks to the researcher about her disease and describes her state of “losing her mind”:

10. 156. J. : This is the story of my life.
10. 157. R. : This is the story of your life! You lose something and you can’t figure out what it is that you’ve lost.
10. 158. J.: What is it (that I've asked)? What do I need it for? Can I live without it?

In addition, the data analysis of the 10 sessions revealed that as a partner in a conversation, she was capable of raising challenging issues and provoking interesting discussions on a variety of topics including religion, world history, immigration, language learning, world poverty, racial and gender discrimination. Therefore, throughout the sessions with the researcher, she proves to be a person with a rich life experience. Her ability to be fully engaged in a series of conversations as an active and interesting interlocutor, even under the condition of her physical and emotional state associated with her disease, contradicts the image others have about her as someone who is not capable of social participation.

Results and Discussion

Consider Excerpt 2, where Jane is responding to the story told by the researcher. Excerpt 2 (Session 2). “Unequal Distribution”

2. 593. J.: There you are. So peace.
2. 594. R.: Peace. And I'm so glad, I am so glad.
2. 595. J.: I bet. You sure wouldn't be [chuckles] the other way.
2. 596. R.: No and you know, I mean here’s why friends are so important because I told this to a friend of mine, I told the story, and uh she said, ‘Oh, this just, this is just gonna cause trouble’.
2. 598. R.: And then I talked to a lawyer, and that’s exactly what the lawyer said too. The lawyer said, ‘You know I’ve never seen when there is unequal distribution, then somehow or other, the children, they’ it’s just like you say, it’s human nature. They feel that it isn’t fair.
2. 600. R.: You’ve learnt the hard way.
2. 601. J.: Mine (especially), my daughter, when my children were small, and I remember. I, there was a store that had a sale for baked goods of that day, and I thought well, (I was always worried about feeding them). I just get three for the boys. Oh! She said, ‘Where’s mine?’ I thought you wouldn’t want this!
2. 602. R.: But she thought she should have it.
2. 603. J.: She, Oh my God! Never again. You think it was gold.

First, this excerpt reveals Jane’s cognitive ability to produce a response story, i.e. the second story in real conversation time. It means that she has been capable of retaining in her memory the moral of the first story (2.593 – 2.598) told by the researcher and responding to it with a second coherent story that addresses a similar issue – “unequal distribution” among siblings. Second, while telling her story, Jane keeps the floor for more than one turn (e.g., 2.601 and 2.603). Third, the data show that Jane has created a coherent story that has a preface, such as “Mine (especially), my daughter, when my children were small, and I remember...“ (2.601), thus signaling to the researcher her readiness to take over the floor and to tell her own story. It also has the main part that starts at “there was a store”
and ends at “I thought you wouldn’t want this!” (2.601). Jane concludes her story with the following line, “Oh my God! Never again”. (2.603), meaning she would never treat her daughter unequally (Mubarak & Rhaif, 2021; Markova, et al., 2021).

In addition, Jane was capable of co-selecting the words in a story by referencing them to the topic of the story about her children. For example, the following nouns “daughter, children, boys, a store, a sale, baked goods, day” have been selected by Jane by reference to each other and have been semantically constrained by the topic. Thus, the data show that all the above-mentioned elements available in storytelling, such as remembering the first story, memory search for a corresponding second story in real conversation time, topic maintenance and topic coherence, use of vocabulary that is semantically constrained by the topic, which make storytelling a cognitively demanding task, were used by Jane. There is also evidence to suggest that storytelling has been used in Excerpt 2 as a means and an end. In other words, by saying, “I remember” (2.601), Jane has claimed to perform the cognitive function of remembering. At the same time, the data show that her cognitive process of remembering the details from the past and recalling past experiences has been initiated and mediated through storytelling (Tsou et al., 2006; Davidson, 2004).

In Excerpt 2, she was able to reconstruct a part of her life that might have been almost forgotten. By showing the researcher that she has a similar story to share, Jane re-claimed her right to the experience and her ability to function as an active and valid participant in a conversation capable of performing cognitively demanding tasks, such as for example remembering something from the past and presenting it in the form of a story. It should be noted, however, that this kind of remembering might not be possible without the first story that was told by the researcher without any simplification or adjustment characteristic of Elderspeak (Marslen-Wilson & Tyler, 1980; Demuro & Gurney, 2021).

An example of Elderspeak is seen in Excerpt 3. Excerpt 3 (Session 9) “Hi!”

9. 171. R. : Hi!
9. 172. The staff member (S.) : Hi! Hi!
9. 174. S. : How are you?
9. 177. R. : She looks good, doesn’t she? She just had her hair done.
9. 178. S. : Yeah, it’s nice!

In contrast to the simplified discourse of Excerpt 3, the story told by the researcher in Excerpt 2 has all the features of naturally occurring speech, such as pauses and repetitions, for example “Peace. And I am so glad, I am so glad” (2. 594), fillers, such as “uh” (2.596), false starts, for example “the children, they it’s just like you say, it’s human nature. They feel that it’s not fair.” (2. 598). Therefore, Excerpt 3, a typical example of Elderspeak, does not show and does
not lead to any complexity and it can not be called languaging (Yang et al., 2015; Cowley & Gahrn-Andersen, 2019).

Excerpt 2 also reinforces Bakhtin’s idea that speech is not neutral; it is heterogeneous and dialogic by nature, and it is always addressed to the other (Allison et al., 1997; Wilden et al., 2013). Excerpt 2 shows that the first story addressed to the participant has initiated the second story that in its turn has been filled with overtones and echoes of the first story, thus establishing the grounds for a new, shared experience and mutual trust. Throughout the sessions, there is evidence to suggest that there is a growing trust and mutual understanding between the researcher and the participant. For example, consider the following excerpts, where Jane has expressed her appreciation of meeting the researcher and her interest in their conversations (Excerpts 4, 5 and 6).

Excerpt 4 (Session 3). “I am Waiting for You”

3.1. R. : How are you?
3.2. J. : I am fine. I am waiting for you.

Excerpt 5 (Session 9). “How Lucky I Was”

9. 42. J. : How lucky I was.
9. 43. R. : What was that?
9. 44. J. : That I met you.
9. 45. R. : Oh, well…Well, we're both lucky, aren't we?

Excerpt 6 (Session 12). “I am Glad I Met You”

12. 905. R. : Okay? Then you'll remember me. And you'll remember that I'm coming back. Oh, there's a little card too. There's a little card.
12. 906. J. : Thank you. That's wonderful. I'm so glad I met you.

Excerpts 4, 5 and 6 look very different from Excerpt 7 taken from the beginning of a series of 10 sessions.

Excerpt 7 (Interview 1). “There’s Nothing”

R. : So I have an interview for today, and I'm hoping that after that, uh what we'll do is whatever you want like I was, the idea, one idea I had was that maybe if I bring you that movie, that you'll watch the movie and then you'll tell me all about it, because I'm not gonna have time to watch the movie as well
J. : [in low voice] Uh
R. : Uh and things like that, all kinds, I mean I can, we can come up with lots of things to, to do uh, but it's just that I'm, I'm interested in, in hearing about you and your life.
J. : There's nothing-

The evidence suggests that at the beginning of the intervention, Jane was reluctant to share her stories with the researcher because the element of shared
experience and trust that could be created through storytelling has not been established (Kim & Wilkinson, 2019; Pappas et al., 2002). Another interpretation of her reluctance to co-operate at the beginning of session 1 and to produce more complex language could be explained by the fact that her recent years have been solitary and she has not been exposed to language in the LTCF before the intervention. The data in Excerpt 2 show that languaging presented as storytelling has restored her relationship with the outside world; it has “pushed” her to produce a more complex language (e.g., Excerpt 2) and facilitated a positive cognitive and affective change (Excerpts 4, 5 and 6).

**Conclusion**

We believe that the findings of the study support the ideas proposed for discussion by the general public that we need to reconsider the ways our society treats elderly people affected by memory loss (Foer, 2007). Therefore, the major challenge that this study attempts to address is to assess an intervention designed to help elderly people suffering from memory loss to improve their quality of life, to regain their memories and their identity. We believe that this alternative approach to language “as a subject [filled] with dialogic overtones, a form of dynamic energy” Wertsch (2006), that mediates cognitive activity adds a more humanistic value to our understanding of language and the role it plays in people’s lives.

**References**


