# Narrative Medicine and NIDCAP: What Can We Learn From Each Other?

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DOI:10.14434/do.v16i1.35768

## Aim

To present the theoretical background of narrative medicine, highlight its specificities in the neonatal period, and show how NIDCAP is relevant at all stages of the narrative process.

## Methods

Comparative analysis of the theory on NIDCAP and narrative medicine.

## Results/Findings

The narrative process defined by Rita Charon[1] is divided into three stages.

**Attention** is the first stage. It refers to the way practitioners listen to the patient's behavior and talk. It needs a special state of mindfulness and attention, focused and open-minded. In the neonatal period, we listen to the baby's behavior and to the parent's story and behavior.

The *NIDCAP observation tool*, naming, describing, and preselecting specific behaviors, helps us to listen to premature babies. With the help of narrative medicine, we can improve the way we listen to parents using our *close reading* session skills. During the close reading session, we learn to be actively aware of how the stories are told: perspective, form, temporal structure, plot, and desire.

**Representation** is the second stage. It refers to the way practitioners write what they have learned from the patient.

When health professionals write, they discover aspects of the experience that were not evident to them. Writing is revealing what was present but hidden. It reveals some truth about the patient, and about the writer themselves. It could be seen in the words chosen, or in the form of the writing. About the words, Roland Barthes[2] makes a difference between Denotation and Connotation. In the neonatal period, we write about the baby's behavior, and about the parents' stories.

Considering the baby's behavior, the *guidelines proposed to write the NIDCAP report* reflect the care philosophy supported by NIDCAP. By introducing the baby by his name, we recognize him as a person. By using the active verb, he is a living person in motion. By writing in a fashion that is readily understood by and is supportive of parents, we testify to baby and family-centered care. By describing a baby as available to actively seek well-modulated functioning to approach stimuli, we defined them as an actor of their own development. Respecting and endorsing those writing guidelines is pushing us to change our care philosophy.

Considering the parents' stories, narrative medicine proposes to use a *parallel chart*. In this file, you write what the parents tell you, but also how you feel and react to it. Once written, the parallel chart is used as a starting point for the *reflective practice* recommended during the NIDCAP process.

**Affiliation** is the last stage of the narrative process. It refers to how the patient and the practitioner share the writing producing an efficient and trustful partnership. This implies that they believe in the power of words, as John Langshaw Austin[3] explains in the speech act. In the neonatal period, what is written on the baby by the professional and/or the parents can affiliate parents and health care professionals for the sake of the premature baby.

The way NIDCAP *recommendations* are written is a tremendous example of this speech act. Including parents' preferences is a sign of affiliation with parents. Starting recommendation with the behavior of the baby, and ending it with his developmental goal, is a sign of our affiliation with the premature baby.

## Relevance to NIDCAP and Conclusion

To know the theory of narrative medicine helps us to understand how narration plays a powerful role in NIDCAP for the parents, and the professionals.

References:

1. Charon R. Narrative Medicine: Honoring the Stories of Illness. 2006. Oxford University Press.
2. Allen, G. Roland Barthes (1st ed.). 2003. Routledge. https://doi.org/10.4324/9780203634424
3. Oishi E. Austin's Speech Act Theory and the speech situation, *Esercizi Filosofici* 2006, 1 (1):1-14. ISSN 1970-0164

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