Listening to and letting pain speak: poetic reflections

British Journal of Pain
2018, Vol 12(2) 95–103
© The British Pain Society 2017
Reprints and permissions:
sagepub.co.uk/journalsPermissions.nav
DOI: 10.1177/2049463717741146
journals.sagepub.com/home/bjp
SAGE

Richard B Hovey¹, Valerie Curro Khayat¹ and Eugene Feig²

Abstract

The humanities invite opportunities for people to describe through their metaphors, symbols and language a means in which to interpret their pain and reinterpret their new lived experiences. The patient and family all live with pain and can only use their pain narratives of that experience to confront or even to begin to understand the quantifiable discipline of medicine. The patient and family narratives act to retain meaning within a lived pained experience. These narratives add meaning to the person as a stay against only having a clinical–pathological understanding of what is happening to our body and as a person. We need to understand the pathology pain while also being mindful of suffering. In this article, the theoretical and scientific approach to pain research and clinical practice intersects with the philosophical, ontological and reflective lived experience of the person living with pain. Through unique pain narratives, poetry and stories as a means of offering empathy and understanding as healing, the humanities in medicine bring into meaning another kind of therapy equal to the evidence-based medicine clinicians and researchers use to seek a cure. In this way, the medical humanities are addressing the person's healing through the reduction of suffering and isolation by letting pain speak while others can focus in on their medical knowledge/practice and research while 'finding' a cure. Listening to pain opens-up to the possibility that much can be learned through multiple expressions of the pain narrative. This article provides an invitation to learn how we might articulate and listen to pain carefully and differently.

Keywords

Medical humanities, lived experience, Chronos and Kairos, pain narratives, suffering, metaphors, hermeneutics, pathology, chronic pain

Humanizing narratives

This article was written to explore chronic pain as expressed through the different types of narratives, stories and poetry that we can use to help elucidate for the person living with chronic pain the unsayable. The importance of the personal story, instead of a constraint conventional 'medical' narrative, has been explored and demonstrated over the years within the field of medical humanities by authors such as Arthur Kleinman, Arthur Frank and Rita Charon. In the case of chronic conditions/illnesses such as pain, narratives as well as stories and poetry reveal themselves differently, as experiences that become increasingly complex with the passing of time for the person living with the condition in question. The humanities provide the place where the

chronic pain narratives and/or stories can find their place among the healthcare providers and the people who treat our suffering through new metaphors, symbols to help interpret the lived experience of chronic pain, otherwise the clinical discipline of medicine

¹Division of Oral Health and Society, Faculty of Dentistry, McGill University, Montreal, QC, Canada

²Montreal Pain Support Group, Montreal, QC, Canada

Corresponding author:

Richard B Hovey, Division of Oral Health and Society, Faculty of Dentistry, McGill University, 2001 McGill College Avenue, Suite 500, Montréal, QC H3A 2A7, Canada.

Email: richard.hovey@mcgill.ca

dissolves the meaning from life and leaves the person only a pathological understanding of what is happening to the body with its physical pain with a soul that continues to suffer.

To remain human with chronic pain means to learn to deal with the absurd, being chronically overwhelmed, living in and through chaos, and all the while struggling to find new ways to express yourself, such that you do not lose your sense of self and world. This quote from van Manen helps to locate the essence of the lived experience to understand the totality of living a life, one including chronic pain:

The German verb *erleben* literally means 'living through something' – Lived experience (*Erlebnis*) is an active and passive living through of experience. Lived experience names the ordinary and the extraordinary, the quotidian and the exotic, the routine and the surprising, the dull and the ecstatic moments and aspects of everyday experience as we live through them in our daily human existence.¹ (pp. 812–813)

Before my own chronic pain experience, I thought I understood and I attempted to imagine, well intentioned and empathically, what living with chronic pain must feel like. However, learning to live with my own chronic pain over the past 3 plus years revealed I really did not understand. Only through my own lived experience of pain did I realize I had imagined the unimaginable, even though I thought I could understand the predicament of the other person. Prior to personally living these extraordinary additions to our lives, such as chronic pain, we experience them on an intellectual level; in a 'pre-reflective, non-reflective, or atheoretic' way while trying to make sense of them. My new experience of living with pain brings new challenges to a life I had already thought I had figured out. I asked and continue to ask the question, 'what will my new life be like'? How can I learn from others who have come before me and can I learn to live well in a new lived experience, '[...] realizing that we cannot simply access the living meaning of lived experiences through introspective reflection?'¹ (p. 812).

As we go through the pain trajectory mostly at first dominated by the healthcare system where appointments waiting with disappointments abound, we need to constantly keep working to find ourselves again and again, yearning to live well again, even with pain, we observe, reflect and, in this case, write about our experiences. These are about my experiences with others I have met and who live with chronic pain, as I continue to learn from them as well as from my pain. I wanted to explore pain through my observations, narratives and stories, learning about the need for humanizing pain and how time (quantitative vs qualitative) can be thought of differently with their healing potential. This

piece was not written about the unpleasant experiences of living with pain, but rather to metaphorically walk with interested others through reflections, narratives and stories of the pain experience.

Narratives or stories or both?

One type of narrative is healthcare provider centred and another we tell for ourselves and others, if they listen. This difference in the expectations for narratives and stories can be confusing to the pain sufferer as they try to find the words to satisfy the brevity of healthcare. Always living with agonizing loss from pain told only through stories that contextualize the evolving chronic pain experience. This can be quite confusing for the chronic pain sufferer who is discouraged from exploring the depths of their pain, remaining in a superficial representation of the profound. The pained person begins the explication of their pain with a number on a Likert scale, how unsatisfying it is, but is taught by healthcare how not to speak about pain.

For example, the narratives within healthcare are devoid of context; it is about the facts. Likert scales replace narratives about pain. Hope, false or otherwise, for a full recovery is the promise of modern healthcare as it dominates our time and thoughts. While the narratives outside of healthcare revolve around life, changes and challenges, our cathartic narratives are sorely needed as a stay against the personal devastation of suffering created by chronic pain. This article's intention is to explore narrative types; some we are forced to have and the ones we need to learn to have with attention to considerations of the role of time, pain and healing and how it plays into the experience of living with pain. This perspective is one from chronic pain survivors with the help of others to make sense of the narratives we tell ourselves and reflectively with others to consider other possibilities. In this article, we endeavour to reveal how narrative is an important, yet perhaps under-utilized resource to reduce suffering and isolation. However, regardless of the type or quality of our narratives and stories, we first need to learn how to listen. This is to listen in the way Gadamer² suggests is parallel to the hermeneutical: 'In human relations the important thing is, as we have seen, to experience the Thou truly as Thou – i.e., not to overlook his claim but to really let him say something to us. Here is where openness belongs' (p. 361). The listener is listening openly for the truth. However,

Before we can hear the truth, we must be open to listening and listening with one's ears so that the felt truth is within the body's sense of the heard truth and therefore available to the experience of *aletheia* (*Aletheia*: *Aletheia* comes from *Lethe*, a river in Hades, the water of which, when drunk, produces oblivion of the past; thus, it is called the

‘river of forgetting’. Heidegger referred to *aletheia* in the Hermeneutic tradition of bringing something hidden into the open and therefore into unhiddenness³ (p. 6)) the unconcealment (unconcealment: When one uncovers something (unconcealment) another something has to be forgotten or left behind (concealment) to be found again at another time⁴ (p. 177)) and opening-up toward truth that is vibrant, resonant, echoing, it cannot be certain, cannot be controlled.⁵ (p. 245)

We need to understand that there is, in human experience, no single objective truth but the individual truths that comprise our human experience.

The why of the narrative-story

Moules⁶ writes,

... that the word story has perhaps come to mean something else to practitioners, then it has to clients, and it is in this very separation where language can stand in the way of the important work of hearing what needs to be heard and acknowledging the pain, history, events, and legacies behind the words. The complexity of all this is not just a story and can never be contained within only one story. (p. 233)

Hermeneutics is a reflective and interpretive approach to understanding human experiences, such as the transition from acute to chronic pain.⁷ Hermeneutics ‘deciphers the obscure, pursues sense and projects meaning, reveals the hidden, contests what is given, discerns the possible and re-animates whatever the present has silenced’.⁸ This description of hermeneutics offers a means philosophically to understand the complexity of learning to live with pain. As such, it is a manner of thinking that is open to many ways of understanding a topic, while being conscious that not all possible understandings are reasonable, relevant or helpful.

As a person living with pain, this transition creates a dialectic of the narratives from healthcare (facts, numbers and sometimes happy to unhappy faces) and the stories that we use to make sense of our suffering with chronic pain. It becomes helpful to understand the complexities of transitioning from acute to chronic pain more so as a more human process with the narrative-story. The idea of hyphenating these two words comes from the concept of narrativity that helps explain the transition from healthcare narratives to living with affirming stories as dependent on the degree of detail, emotion and plot.⁹ What I intend by narrativity here is the recounting of events in a chosen and relevant sequence. The more narrativity is elaborated, the more it may transform into a story. For example, from my experiences, if narrativity was used to explore the

transition from acute to chronic pain, while in the healthcare system, low narrativity is preferred not by the patient but by the healthcare providers. However, the transition into chronic pain also includes suffering which results in the expression of a complex story of how pain has affected one’s life. The story rightfully becomes the mode of expression (high narrativity) for participation in pain support groups, community engagements and with the helping of new chronic pain sufferers by those who have learned to live, some well, with pain for years and even decades. Rita Charon explains the importance of providing space for the personal story within the healthcare system:

Patients long for doctors who comprehend what they go through and who, as a result, stay the course with them through their illness. A medicine practiced without a genuine and obligating awareness of what patients go through may fulfill its technical goals, but it is an empty medicine, or, at best, half a medicine.¹⁰ (p. 6)

Finding one’s voice and using the narrative-story also allows us to become empowered through active participation in the healing process alongside the healthcare specialists with which one is interacting.

When speaking to people about their pain experience, many resort back to an expression of low narrativity, meaning that they automatically default to recounting the dates, treatments, tests and drugs associated with their pain as a series of bulleted points, the facts. This may be due to their training to speak while engaged in healthcare. However, if I ask another kind of question about the meaning of living with pain, we open-up conversations to increasing narrativity, we have a story. Here, the richness of experience, their sadness, isolation and loss become clear, but as well, their courage, tenacity, generosity and support of others are made explicit. Narrativity shows us that we may begin with a narrative, but in time it can become our new story. All we must do is ask the right question, at the right time and in the right way, the narrative and story become joined by a hyphen, not as separate entities. The narrative-story is the means for exploring and finding (deeper) meaning amidst the experience, an element essential to healing. Here, we must also recognize the distinction that is to be made between the curative and healing. The need to encourage stories of hope acceptance and a positive future begin, as Hutchinson explains, with acceptance:

The goal of the patient in the curing mode is survival [...] Healing, on the other hand, comes from the acceptance of change. This acceptance allows the patient to grow to a new sense of himself as a person (perhaps with disease) with a new experience of integrity and wholeness that is different than the old status quo.¹¹

To explore the dialectical nature of the narrative-story from the brevity of medical speak, focused on the physical pain and healing needed-over-time, the person living with pain is supported in expressing themselves through contextual relationships (e.g. supportive networks to explore their suffering and their story with others who understand). The duality of narrative and story, as they play-out during the transition from acute to chronic pain, begins with a focus on chronic pain's pathology (medical time) as well as its non-pathological aspect (suffering time).

Time and pain

A hermeneutic approach echoes the potential for renewal that the narrative-story presents. Interpretively, hermeneutics offers a way to make sense of complex realities and to find ways that go beyond colloquial comprehensions towards new and novel ways of understanding human experiences. This hermeneutic approach led to looking at time through the lens of two Greek words, Chronos and Kairos.¹² Within an interpretative context, these two words offer further understanding of the transition from acute to chronic pain. Chronos and Kairos help to discuss time and how the humanities and arts enable the potential for healing.

Chronos represents the sequential time of life where we are motivated by clocks, medical appointments, deadlines, watches, calendars, agendas, planners, schedules and beepers. It describes and drives us to be in a certain place at a set time. We have many clichés for Chronos, 'as time marches on' or 'time heals all wounds' (but not chronic pain). We know whether we are on-time, early or late and how much time we waited, days, weeks, months, and years to be seen (not heard) by a healthcare provider. Chronos becomes the predominate type of time for the person living with acute pain. From the initial trauma, we become consumed by the precarious world of time and the healthcare system. We associate curing with time and even a race *against time* to minimize suffering (i.e. the impact of pain on our life). As the Greek philosopher Aristotle¹³ observed, 'Pleasure and pain are also the standards by which – to a greater or lesser extent – we regulate our actions' (p. 36). As human beings, we strive to avoid pain and suffering. However, when we speak of healing and chronic pain, the contrary – that is 'settling into' and learning to accept rather than avoiding the pain – becomes essential to healing.

Our perception of time changes with pain, and our seconds, minutes, hours, days, months, and years are painfully longer, more pronounced, dreaded and insufferable. The person entering into a state of acute pain time is ever hopeful that his/her pain will soon be relieved and that life will return to what it was before

pain. There remains an optimism that the next healthcare professional will know how to cure us. Chronic pain time is when we wait agonizingly for the next medical appointment, magnetic resonance imaging (MRI), nerve block injections, surgeon consultations (operate or not) and specialist to free us from our pain. This experience, which many of us have had, also points to the belief that freedom from pain can only come from a healthcare specialist (something outside of ourselves). On the other hand, in the context of Kairos, narrative-stories are a resource inside ourselves that we can draw upon to find relief through the transition from acute to chronic pain. This relief and healing evolves from finding greater meanings that support a 're-storying' of ourselves through a narrative-story. To understand Kairos and the narrative-story, we must first get a sense of Chronos within the healing process.

Likert scales and brevity

It is easier for us to shut our eyes than close our ears. It is easier for us to remain untouched and unmoved by what we see than what we hear; what we see is kept at a distance, but what we hear penetrates our entire body.⁵ (p. 32)

Chronos time is within the quantitative domain, not only from the perspective of our engagement in healthcare, fixed appointments with long waiting times, as well as with our medications. Each prescription to dull the pain is measured with precise dosages and times when to be taken at specific times of the day. Likert scales reduce our pain to a circling of a number, sound-bites, terseness of narrative and making conversations impossible, as the person living with pain bounces from one healthcare provider to another, seeking a conversation about what is going on, what can be expected and what is next. We as pain sufferers can get trapped in the unfamiliar jargon medical speak, pushing ourselves even further away from knowing what is happening.

Initially, we do not have the words to describe the barrage of types of pain our bodies are feeling. This is so new to us, we feel exhausted all the time, fading away and losing hope, we ask please talk to me, listen to me! We used to believe wholeheartedly in Chronos where appointments were scheduled, meetings, movies, recreational activities, socializing and travel were taken for granted but now Chronos is only cruel. It vindictively taunts the pained person in the middle of another sleepless night, I accurately and obsessively count hours of fitful sleep. Days are no-longer filled with work, activity and life, Chronos reminds me of my new incarceration, I cannot and do not want to leave the house, I need to save my energy for the next medical appointment, I become silent and isolation slowly

takes over my time. This increased awareness of Chronos, devoid of stories and the sensibility of Kairos, creating the illusion of a race against the clock, time running out so to speak. We feel desperately a loss of ever returning to a previous state of being in the world, which seems further and further away with each passing day.

Acute pain has a time limit and in Chronos time transitions away after 3 months. A common definition for the transition from acute to chronic pain is 12 weeks. This transition also marks the passing of Chronos to Kairos time, so to speak, from one identity (patient) that healthcare defined you as to another. Although, the pain remains persistent and present Kairos offers a new way to be with time a profound shift. I have medications to dull the pain but the side effects, which include my inability to concentrate and work, become frustrating. I see and feel my life fragmenting around me. I have nerve block injections, am told to see a physiotherapist, do yoga, swim, walk, try acupuncture, chiropractic treatments and support groups.

Kairos pain, the time in-between

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. (R.M. Rilke)

What I ache for is a repose from the relentlessness of Chronos time. Kairos time is lived as the time in-between appointments, treatments and healthcare visits. It is the time to suffer but is also filled with the possibility and promise to re-story your life, whereas Chronos time isolates by reminding you always that time is passing you by, 'tick-tock', accentuating your sense of loss and hopelessness. Kairos does not. Time becomes lived moments or new experiences. Furthermore, it also refers to the right moment, the moment of opportunity and hopefulness. The unspoiled moment. It is when something or someone takes your breath away, perhaps in Kairos our hermeneutic sensibility, our ability to sense those ideas beyond only pain begins, heightened by revealing a new awareness or different pathway with a perspective and means of seeing and living our lives with pain. I learn that I can choose to suffer less.

Kairos can become a way to describe the qualitative aspects of pain. It invites conversation, through reflection in a hermeneutic space, with its own sensibility, where one loses their sense of isolation and suffering and returns to finding solitude and peacefulness, even with Chronos lurking in the background. Whereas Chronos demands a surrender through weakness, a breaking or wearing down over time, Kairos gently

provokes a type surrender that reveals our denial of the situation with a reality that the pain is with the body but the suffering belongs to the person. Hermeneutics is a highly reflective practice that has the potential to liberate one from dwelling excessively on the drudgery of pain and suffering. It creates a space where we do not expect a cure but rather provokes a meditation about how my life might become better and still evolving. These reflections need conversations with other people who have experienced chronic pain to learn that healing is not a cure, but rather a means to learn to live well with pain. The hermeneutic conversation occurs in a place where mutual openness and generosity abound. Hermeneutic scholars described this as a place for dialogical engagement, where people can open and reopen the hermeneutical space where the possibility of becoming different to ourselves is preserved, as we authentically learn from each other and about ourselves.^{7,13,14} This is a conversational space co-created by people through trust and shared generosity fused together by compassion and authentic engagement.

Individuality: our narrative-story

There is not one big cosmic meaning for all, there is only the meaning we each give to our life, an individual meaning, an individual plot, like an individual novel, a book for each person. (A. Nin)

Hermeneutics invite the narrative-story during Kairos pain, a self-reflective time where my story of suffering

is not what I read, learn, say or hear; there is no predetermined meaning. What is worth proclaiming is to bring into speech what constitutes our understanding of what is at issue, in order to get things in the right orientation, reducing our pain and confinement, so that we can understand who we are.¹⁵ (p. 2)

The most important and meaningful events and things in our world is experienced in Kairos time, only when the time is right for each person in their own time, the suffering person is waiting for the right time to embrace their Kairos time. However, that time is and was already there but not realized when consumed by Chronos. The work of supportive networks and community that provides the space and opportunity to explore other ways of living with pain emerge with help from others. The humanities offer us insight through the disrupted pain narrative towards a poetic reappraisal of life. Hermeneutics like Kairos is transformational and reflective. It challenges us to re-story ourselves again and again while living with chronic pain. Developing the capacity to verbalize the pain and observing the experience allow us to settle into the discomfort and learn to live it differently through

re-storying. Thus, re-storying is an act of renewal through which we also discover how great our personal agency is part of our own healing.

Eugene is a pain survivor who has experienced chronic pain for over two decades. He is also a facilitator of a pain support group and one of his gifts is to write short poems to all of the pain support group members. These help others to see beyond pain through his true life stories of living with chronic pain. An example of a recent poem and co-author of this article by Eugene Feig explores his experiences of living with chronic pain within Kairos time.

Winter pain

As cold as it is, and as harsh as it is perceived to be. There is nothing more beautiful than seeing snow draped over a large pine tree.

Dogs running and jumping playing in the snow. That was me a long time ago ...

I try to see the best in whatever I face. It helps me get through this never-ending obstacle race ...

I would be happy if things did not get any worst. I'm not even thinking of my situation, somehow, being able to be reversed ...

I'm ok with this life of mine, why can't this moment be frozen in time ...?

Life is a struggle at the best of time, why can't this moment be frozen in time ...?

One would think that life stops in this frozen baron land. In fact, if you look close enough, you can see a winter wonder land ...

Right now, I know where I stand, I know my pain. I would be content if my life would just stay the same ...

Squirrels performing their high wire acts, crisscrossing the power grid, appearing so confident so relaxed ...

Straggles and hardships will always be there. You are right, it's not fair ...

The temperature is bitter; the sky is clear. Walking on ice raises' my fear, maybe because falling on ice ended my career ...

Usually when the temperature drops, it means the sky is clear. At night you could see a million stars high above. In the morning, if you are lucky you might get to see a morning dove ... (Eugene Feig)

We may believe we survive within a Chronos world. But we ache for Kairos. This is our internal dialectic. Chronos requires speed and a sense of urgency, so that

time will not be wasted. Kairos requires space to become more reflective, finds alternative ways to live and breathe deeply again even with pain. You cannot rush the rain storm or the clouds, but you can observe them and allow your imagination to find new meaning for the shapes travelling in the sky above. You can learn to find some peace in the sound of rain and some beauty in the grey, sunless sky. Kairos asks for our willingness to be mindful and to consider alternate possibilities for living our life with pain, like a partner in a slow dance. A dance where sometimes the pain leads the dance but where more and more of the time, the person leads the pain. The dance metaphor is our re-storying. In this way, the pain becomes one part of our story, of the dance sequence, not the story we are subjected to. In other words, re-storying using our unique narrative-stories that allows us to enclose the pain into a new space of meaning. We reposition pain from our centre of life to a peripheral one, where we manage it as we learn to live a good life.

Writing about one's own 'Kairos' moment or even reading someone else's holds the potential of being a powerful catalyst for the re-storying process since it can resonate beyond the confines of personal experience to new understanding. Ricoeur¹⁶ suggests that the reading of a written piece, such as a poem, for example, can transform the reader beyond the structured explanation found within the text of that poem. Its reading and interpretation by individuals opens a specific meaning for that person at the time. Interpretation of the text lifts the suspense and fulfils the relevance of that poem in the present:

For this attitude reveals the true nature of the suspense which intercepts the movement of the text toward meaning. The other attitude would not even be possible if it were not first apparent that the text, as writing, awaits and calls for a reading. This approach to reading is possible; it is because the text is not closed in on itself but opens out onto other things.¹⁶ (p. 161)

The poem that follows exemplifies how meaning and expression from one perspective can resonate to others in this shared moment. The reader whether in pain or not can relate to this kind of Kairos time moment. It speaks of the small things we miss when driven by Chronos and the peacefulness that becomes transferred by the author to the reader.

Living in everyday Kairos

As I look through the trees, down by the lake. The sun is setting, it's beyond breathtaking.

The lake is like a pane of glass, a mirror, a reflection. It takes my mood, my demeanor in the right direction ...

A flawless moment in time. A vision I will retrieve from time to time.

I notice the birds; I hear the frogs. I see the dragon flies hovering over the water's edge.

Off in the distance a blue Herron was landing, with its magnificent wing span exposed in the light, it ... brought my spirits to new heights.

There is something about being around nature, that makes everything so right. If I get to see a sun set, there would not be a single reason to get upset.

Pain and despair, anger and frustration takes a back seat when I see that reflection ... (Eugene Feig)

Eugene's poem illustrates how this hermeneutic reflective moment in Kairos time relieved his pain, even if only for a short time. Becoming aware that we are 'trapped' into a mind state of Chronos while simply hoping for good health again is not enough to achieve relief from pain. In living with chronic pain, we need to seek out the unpredictable and healing time found in Kairos surrendering into the pain first. The word 'surrender' from the mid-15th century finds its roots in the expression 'to give (something) up', from the Old French *surrender* which is to 'deliver over' (from *sur* 'over' + *rendre* 'give back').¹⁷ As we surrender, we are not giving up but giving into something, perhaps the beginning of our new story:

Only when we actively surrender to a mood of passivity and ready ourselves for a chance meeting with Kairos – while refusing to be distracted by everyday business around us – we may seize an insight by letting it seize us or by being seized by it. And yet, if we are not searching it will not find us. Insights will not come if we do not read and reflect, write and rewrite.¹ (p. 823)

To surrender, we must 'give into' and 'settle into' our new story, which includes one with pain. As Ferrini¹⁸ explains, 'Learning to tolerate pain brings us closer to an understanding of the pain'. This means overcoming our resistance to change. Life consists of a continuous movement through various mental and emotional states. We can neither hold onto the comfortable ones with apprehension of what might one day come nor can we remain paralysed by the grasp of nostalgia for a past (painless) existence. We must embrace what is, right now, in this moment. This approach strongly echoes the mindfulness school of thought, which has been increasingly valued over the years by many healthcare specialists, such as John Kabat-Zin as cited by Boyce:¹⁹ 'When we can actually be where we are, not trying to find another state of mind, we discover deep internal resources we can make use of. Coming to terms with things as they are is my definition of healing'. In

mindfulness practices such as yoga and meditation, breath is the vehicle through which one learns to return to the present moment. In a similar way, the narrative-story also becomes a tool through which the mind can be trained to live moment to moment (Kairos) again.

The narrative-story calls for renewal through an exploration of what it means, in our own life, to live with chronic pain. It allows us to take a step back and observe our experience from a different perspective in order to find new meaning. It is an approach that requires us to involve every part of ourselves while we acknowledge not only the pain but also our emotions, our shifting sense of identity and how we can grow from the experience. Our pain becomes our teacher, adding a richer dimension to our story instead of a thief who has robbed us of what we once had.

Discovering our narrative-story is a holistic process and a form of care towards ourselves that can prove to be healing in itself. It moves us to prepare for and fulfill the inevitable task of continuously re-storying ourselves as we learn to live with chronic pain. Kearney and Weiringer²⁰ explain that

whole person prevention is aimed at preventing a loss of meaning or increasing the depth of meaning and connection in our lives [...] whole person prevention is concerned with meaning and the effect that has on our survival and quality of life at a deeper level.

While Chronos moves us to focus on the quantifiable, we become hyperaware of our body and how it carries the pain as we desperately try to escape its hold. Kairos is of the unquantifiable realm. To transition into it, we must learn to find freedom from our pain on another level than through the physical context:

Human freedom involves our capacity to pause between the stimulus and response and, in that pause, to choose the one response toward which we wish to throw our weight. The capacity to create ourselves, based upon this freedom, is inseparable from consciousness or self-awareness.²¹

As we surrender into Kairos, the process of learning to experience life differently gradually unfolds. We find new references to make sense of the changes but not through what is solely measureable or counted like hours. We must learn to forget how to count and simply exist as part of the ongoing flow of our story, from moment to moment. Every moment, not just the ones within the medical time frame of Chronos, might be an opportune moment for healing. As we live every moment consciously like one long dance, we engage with the pain creatively. Re-storying ourselves is no different than the Kairos of creation, when one paints, writes or composes. As we create, we simultaneously begin to live within the new universe of our

narrative-story. Understanding that this narrative-story has no end, only new chapters in which we can imagine ourselves again through new connections is similar to that foundational element of mindfulness: breath. The cycle of breath never ceases and each affords us an opportunity to breathe more deeply.

To tell a story is an act of witnessing and interpretation. It means acknowledging the 'existence of' and by doing so, giving value to our experiences. When we engage in the act of writing or telling our story, we witness ourselves. We give value to what inhabits us, to what we are and what we might become. It is a way of offering care and attention to our own story, cultivating the belief that it does hold meaning. The narrative-story becomes a mirror we hold up to ourselves, so that we may take a closer look and become aware of our current state of being. Such as in the medical process of healing, symptoms must first be acknowledged before they can be treated and then healed. To live solely within the realm of Chronos is to only witness one aspect of our story while awaiting care from an external source. However, when we begin to surrender to Kairos and witness ourselves, we also discover that healing is an ongoing, creative act. As the physical body renews itself, we can also begin to mend through the work and act of re-storying ourselves.

Concluding thoughts

Together, chronic pain interpreted as Chronos pain and Kairos pain helps us to understand the complexity of the lived pain experience. The physical body feels the pain and is managed through the biomedical which is primarily quantitative (Chronos) in the clinical setting or informed through most kinds of research. The lived experience of pain (Kairos) is where we live most of our lives and is the time in-between healthcare visits. This is the time of suffering, reflection and possibility. While physical pain can be managed, suffering through Kairos means to learn to live well with pain:

A Kairos moment has been described as *carpe diem*, a transformative moment of chance and change, depending on our ability and willingness to recognize this moment and to seize the opportunity that is offered in it.¹ (p. 821)

The first step is to listen carefully to oneself and others, then to reflect and accept our situation and then learn to express it through narrative-stories, poetry or art. Possibilities open-up from unexpected places and people only when we are willing to seize the transformative moment.

Conflict of interest

The author(s) declared no potential conflicts of interest with respect to the research, authorship and/or publication of this article.

Ethical approval

This article does not contain any studies with human participants or animals performed by any of the authors.

Funding

The author(s) received no financial support for the research, authorship and/or publication of this article.

IRB study number A06-B31-13A

Experience of living with chronic pain and patients' experiences of its treatment, future outcomes and social implications: 2017–2018.

References

1. van Manen M. Phenomenology in its original sense. *Qual Health Res* 2017; 27(6): 810–825.
2. Gadamer HG. *Truth and method*. New York: Crossroads, 1989.
3. Hoad TF (ed.). *The concise Oxford English dictionary of English etymology*. New York: Oxford University Press, 1986.
4. Caputo JD. *Radical hermeneutics: repetition, deconstruction, and the hermeneutic project*. Bloomington, IN: Indiana University Press, 1987.
5. Levin DM. *The listening self: personal growth, social change, and the closure of metaphysics*. London: Routledge, 1989.
6. Moules NJ. A cautionary tale about stories. *J Family Nurs* 2006; 12(3): 231–233.
7. Gadamer H-G. *The enigma of health: the art of healing in a scientific age* (trans. J Gaiger and N Walker). Stanford, CA: Stanford University Press, 1996.
8. Hovey R. Cathartic narratives for chaotic thinking. *Can Med Assoc J* 2016; 188: E543–E544.
9. Hovey R and Paul J. Healing, the patient narrative-story and the medical practitioner: a relationship to enhance care for the chronically ill patient. *Int J Qual Meth* 2007; 6(4): 53–66.
10. Charon R. *Narrative medicine: honoring the stories of illness*. New York: Oxford University Press, 2006.
11. Hutchinson T. Whole person care: encompassing the two faces of medicine. *Can Med Assoc J* 2009; 180(8): 845–846.
12. Valentine M. Chronos & Kairos: whereof we cannot speak, thereof we must remain silent, <https://mckinleyvalentine.com/fiction> (accessed 12 August 2016).
13. Aristotle. *The Nicomachean ethics*. London: Penguin, 2004.
14. Hovey R and Craig R. Understanding the relational aspects of learning with, from, and about the other. *Nurs Philos* 2001; 12(4): 262–270.
15. Gadamer H-G. *Pain: critical reflections from a medical, philosophical and therapeutic viewpoint* (unpublished translation, J. Arthos). Heidelberg: Universitätsverlag Winter, 2003.
16. Ricoeur P. *Hermeneutics and the human sciences: essays on language, actions and interpretation* (trans. JB Thompson). Cambridge: Cambridge University Press, 1998.

17. http://www.etymonline.com/index.php?term=surrender&allowed_in_frame=0 (accessed 28 August 2016).
18. Centro Studi Bhaktivedanta. Tollerare per comprendere il dolore [Tolerance in order to understand pain], <https://www.youtube.com/watch?v=g7Jk0vI3gxE> (accessed 30 August 2016).
19. Boyce B. The healing power of mindfulness, <http://www.mindful.org/the-healing-power-of-mindfulness/> (accessed 24 August 2016).
20. Kearney M and Weininger R. *Whole person self care: self-care from the inside out*. New York: Springer, 2011.
21. May R. *The courage to create*. New York: W. W. Norton & Company, 1994.