

## Drawing a river

Utilizing the Power of Metaphors in Interviews With Children and Young People

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# **DRAWING A RIVER – UTILIZING THE POWER OF METAPHORS IN INTERVIEWS WITH CHILDREN AND YOUNG PEOPLE**

## **Abstract**

In the field of qualitative health research on children, scholars have called for the inclusion of children's perspectives. Still, healthcare research on children appears to be characterized by an exclusionary approach that stems from a conception of disability and sickness as equivalent to a lack of agency. This article responds to the call to include children's perspectives. It presents the **Double-view (Dovi)-river** interview, which is a drawing- and metaphor-based interview method that enables ambiguous and multi-layered life course narratives. Based on two steps - 1) a life course interview conducted while drawing a river of the child's life, and 2) revisiting and unfolding the child's stories - the method allows for an arts-based, joint exploration of life experiences. Inspired by childhood studies as well as a poststructuralist epistemology, the article discusses and proposes ways to challenge power relations between the adult interviewer and the child interviewee. It is argued that the method can also challenge the predominant deficit view and the dichotomous understanding of children's experiences of their life and capabilities that characterize much healthcare practice and health research, by focusing both on challenges and opportunities. Doing so enables a more nuanced and appreciative approach to children. We draw on empirical examples from a study with children with disabilities. However, we suggest that the method's potential for enabling articulation of the complex and ambiguous can inspire qualitative research and healthcare practice more broadly.

## Introduction

The United Nations Convention on the Rights of the Child, Article 9, and other human rights instruments stipulate that healthcare practice and research are ethically obliged to respect children and young people's views and experiences (Lansdown, 2011; Alderson, 2012; 2019; Unicef, 1989). Regarding research, these ethical obligations further include a commitment to inclusive approaches to, and empowering representations of, children's and young people's perspectives (Beazley et al., 2009; Groundwater-Smith et al., 2014; Wulf-Andersen et al., 2021). In line with this, there has been an increase in awareness of the need to include children's perspectives in qualitative health research, and methodological developments have also reflected a growing commitment to inclusive approaches and empowering representations of children's and young people's perspectives (Brown et al., 2020; Lyndon, 2019; Bryan et al., 2019).

This article aims to contribute to this ongoing discussion, and to methodological development in the field, with a view to fulfilling these commitments. We do this by presenting an innovative, arts-based interview method, the **Double-view** (Dovi)-river interview, which we have developed to give voice to the perspectives, experiences and identities of children in vulnerable positions in a polyphonic manner that embraces ambiguity and messiness. We argue that this method can help challenge the strong deficit view and the dichotomous understanding of children's experiences of their lives and capabilities that characterize much healthcare practice and health research (Falster, 2021; Falster et al. 2022), enabling more nuanced and appreciative approaches to children.

We start with a brief presentation of the background and motivation for the development of the Dovi method, followed by a discussion of the different meanings of the concept of participation

in health research and childhood studies, respectively, as well as a short review of health research literature on the use of drawings, life course interviews and metaphors. We then explain the Dovi-river interview method, including our experiences of applying it in research with children and young people, which we then discuss in relation to the literature in the field, before presenting our conclusion.

## **Background**

We developed and worked with the Dovi-river interview method in two Danish research projects with children and young people in vulnerable positions. Dovi is short for **Double view**. Rather than opposing negative meaning ascriptions, the double view opposes univocal meaning ascriptions by supplementing them with positive meaning ascriptions and explores how such complex and ambiguous understandings may empower children and young people as well as adult practitioners, be they health care professionals, social workers or teachers. The first project, “Deviation as a potential resource” focused on children and young people in care (Warming et al., 2017). The second project, which provided the empirical examples in this article, concerns “Life with a Physical Disability from a Child and Youth Perspective” (Falster et al, 2022)<sup>1</sup>. In that project, we collaborated with children and young people with physical impairments and explored their everyday lives and not-yet-recognized skills and resources deriving from their lives with disabilities. Living, as they do, with conditions that create challenges and barriers that other people do not face, they often develop strategies and skills to handle these that other people do not possess (Guell, 2007). During both projects, we generated rich data based on participant observation, as well as different types of qualitative interviews

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<sup>1</sup> See also <https://ruc.dk/en/research-centre/research-centre-life-mobility-disability>

and workshops with children and young people, practitioners, parents, and adults with physical impairments. The Dovi-river interview method came to life as a part of this portfolio of qualitative methods.

Researching children and young people in potentially vulnerable positions calls for intensified ethical reflections throughout the research process. Unlike many other countries, Denmark does not have an ethical approval committee in the field of human and social sciences (to which the two projects belong), though it does have a national code for research conduct. We designed our project with careful attention to GDPR and the recommendations of the Danish Code of Conduct for Research Integrity (<https://ufm.dk/en/publications/2014/the-danish-code-of-conduct-for-research-integrity>), which emphasizes beneficence, confidentiality, and consent. However, we strongly agree with Ellis that relational ethics, i.e., “act[ing] from our hearts and minds” (Ellis, 2007: 3) are far more important, though also more demanding, than procedural ethics. Thus, the research was carried out from the relational ethics perspective in terms of ethical mindfulness, i.e., being present in the moment, and being able to sense and act carefully on ethically important moments (Gullemin and Gillam, 2004). We worked with continual ethical capacity building, which involved discussing ethical issues and, not least, ‘ethical[ly] important moments’ with our colleagues and advisory boards, which included academics, practitioners and young people from our target groups.

### **Searching for small stories and the emergent**

Qualitative life world interviews, including life course interviews, can be seen as guided, in-depth conversations about an issue on which the interviewee is the life expert (Bevan, 2014;

Brinkman & Kvale, 2014). Thus, they often follow the narrative structure of everyday conversations, where the teller and the listener (the latter through follow-up questions and tentative interpretations) construct a coherent and unambiguous meaning. However, such a construction is only possible by omitting and fading out the messy and ambivalent, multi-layered experience of the lived life (Bakhtin, 1984; Tanggaard, 2009; Spyrou, 2011). Critical acknowledgement of this, including the related risk of reaffirming power relations, has propelled scholars to search for methods that can articulate messy, complex and ambivalent, multi-layered experiences and identities (e.g., Lyndon & Edwards, 2022; Baker et al., 2020; Satchwell et al., 2020). That is what Bakhtin (1984) called ‘dialogical truth’, which is always unfinalized. The dialogue between various unfinalized perspectives enables unknown and unforeseen possibilities to arise (Bakhtin, 1984; Morson & Emerson, 1990). In line with the above-mentioned endeavours to voice messy, complex, and ambivalent multi-layered experiences and identities, we developed the Dovi-river interview method to overcome the pitfall of sorting out what doesn’t fit the mono-vocal unambiguous narrative, that is, what Davies (2015) terms ‘emergent listening’ as opposed to ‘listening as usual’. Listening as usual is a form of listening where the listener presumes to know the essence of the other’s perspective and based on that only hears what fits with that assumption. Thus, this type of listening is based on, and – intentionally or otherwise - reproduces the normative order. Conversely, emergent listening enhances opening up and hearing the not-yet-known. According to Davies, this type of listening involves a radical break from what one presumes to know about the other and in how one makes sense of difference (Davies, 2015).

The Dovi-river interview method aims to produce such breaks, not only by helping the listener, but also the teller, to break with ‘telling as usual’. Telling’ is also framed, though not deter-

mined, by dominant meta-narratives in terms of meaning making and sorting out what is relevant to include in the narrative, and what is not. In line with a post-structuralist epistemology, we did not search for the authentic voice of the children and young people, but to invite and facilitate co-creative thinking for the purpose of constructing ambiguous and multi-layered narratives of children's lives, identities, and perspectives. This requires a break with the usual approaches to listening, telling, and sense-making. Thus, through emergent listening and co-creative thinking, we aimed to approach children's perspectives polyphonically, and to let small stories emerge (Bamberg & Georgohopoula, 2008), which challenge the (unilateral) deficit view on children in vulnerable positions, including those with disabilities.

Our research is located both within the field of childhood studies, and the related field of disabled children's childhood studies, both of which emphasize the importance of children's childhoods here and now and recognize children's right to life quality and influence over issues that affect their lives (Tisdal & Punch, 2012; Runwick-Cole et al., 2018; Thomas, 2019). Using the term 'participation', scholars working within this paradigm have emphasized the need to voice children's perspectives and increase their influence over processes that affect them, both for ethical and democratic reasons (Wall, 2013; 2014; Thomas, 2019) as well as to improve health care and social care services (Runwick-Cole et al., 2018; Ólafsdóttir et al., 2019; Lansdown, 2011). This is the motivation for involving children and young people in our research, all the while acknowledging that it is not possible to uncover the 'authentic' voice of a child (or anyone), and that children's perspectives and agency are relational and subject to structures and power relations (Esser et al., 2016; Spyrou et al., 2018; Warming 2023). The latter motivated our aim to achieve creative co-thinking to overcome the dominant, deficit-focused meta-narrative that otherwise tends to structure our thinking on children and young people in vulnerable positions, thereby enabling other narratives to emerge.

## **Child participation in health research and sociological childhood studies**

The field of health care research and practice is witnessing an increased interest in children's perspectives and participation. However, based on a review of the literature, the concept of participation appears to have a different connotation than that of voicing and empowering children's perspectives (as is typically the case in childhood studies), except for a few exceptions (e.g., Lightfoot & Sloper, 2003; Teachman & Gibson, 2013; Ólafsdóttir et al., 2019; Bryan et al., 2019). Thus, in health care research and practice, the concept of participation typically addresses physical inclusion with an emphasis on practices that enable children with health problems or physical impairment to participate in 'normal' everyday life. This is a pressing issue, as physical and social exclusion remain well-documented problems in the everyday lives of these children (Knight et al., 2019; Rekaa et al., 2019; Falster, 2021). Nevertheless, we are critical of how healthcare practice and research with this focus are often blind to, and tend to reaffirm, the ableist and ageist power relations that contribute to such discrimination and exclusion (Olli et al., 2012; Falster, 2021). Thus, such approaches often reproduce views of children as mere 'becomings', that is, as not yet competent, passive objects of adults' actions and decisions, failing to value and acknowledge children's rights and perspectives, and adopting a deficit approach to the latter's bodies and capabilities (Lightfoot & Sloper, 2003; Falster, 2021).

Historically, health care has been grounded in a medical logic and a body normativity that establishes a clear distinction between health and sickness, and a related power relationship between the patient on the one hand, and 'experts' (e.g., doctors, physiotherapists, occupational therapists) on the other, who purportedly know what is best for the patient. In recent decades, the field has moved towards increased acknowledgement of the value of involving patients, though "several barriers prevent the full implementation of health care co-production, nurturing



the application of the traditional bio-medical model” (Palumbo, 2016: 72). When the patient is a child, these barriers manifest even more strongly due to their intersection with generational (ageist) power relations and the notion that the child’s best interest is defined by adults. The result is that the value of children’s potential contributions is overlooked, and their rights to influence decision-making about the treatment plan are neglected (Quaye et al., 2019). Moreover, children’s participation is regarded as involving a dilemma (or a challenging balance) between protection and autonomy (Altavilla, et al., 2021; Council of Europe, 2019). However, this is changing, and this article supports that change by offering a method that can enhance the participation of children in health care research and practice.

### **The use of drawings and life course interviews in health care and research**

Life course interviews are one of the most frequently used methods in health care research, where they are often used to enable children to articulate their own perspectives on their lives or health care services (e.g. MacDonald et al., 2011; Stefansdottir & Egilson, 2015; Hemmingsson et al., 2016). Scholars have argued that this method can be sensitive to ambiguities (Eldén, 2012; Teachman & Gibson, 2013; Guell, 2007). Life course interviews with children are often facilitated through different activities that can enhance children’s unfolding of the issue in focus, for instance arts-based interactions such as drawing (Teachman & Gibson, 2013; Elden, 2012; Bhagat & Howard, 2018), role-playing with dolls (Teachman & Gibson, 2013), writing and stories (González-Rivera & Bauermeister, 2007).

Other kinds of qualitative interviews in health care research also make use of drawings as a facilitating tool, especially (but not exclusively) to elicit children’s descriptions of their own mental states (Bryan et al., 2019; Linder et al., 2017; 2018; Woolford et al., 2015). Drawing has also been used as a method to enhance children’s memories and provide information about a given experience (Brooks, 2005; Gross, Hayne & Drudy, 2008; Macleod et al., 2014).

Overall, drawing is regarded as a helpful tool to support children in speaking up and being more forthcoming in an interview (Driessnack, 2006; Patterson and Hayne, 2011; Woolford et al., 2015). Brown et al. (2020), Lyndon (2019), and Driessnack and Gallo (2013) argue that drawing is more effective in capturing the complexities of children's experiences than adult-centered approaches such as directed interviews, surveys, and questionnaires. However, Patterson and Hayne (2011) also note that using drawing in an interview does not prevent children from reporting false information, and that drawing can sometimes magnify children's inaccuracies. Likewise, Macleod, Gross and Hayne (2014) point out that children who are asked to draw without specific instructions tend to let their imaginations run wild. While we do not deny that drawing does not prevent children or anybody else from reporting false information, and may even make their imaginations run wild, we disagree that this is a particular risk in research with children – rather, we consider that these concerns reveal an – albeit unintentional – adultist age-ist approach that risks othering and discriminating against children (Wall, 2022; Warming, 2022).

Moreover, the above discussion of the pros and cons of using drawings in interviews with children in healthcare research appears to be rooted in what could be termed 'realistic' approaches that regard children's identities, emotions and experiences as more or less stable, and which the researcher can uncover using the right methodologies. Inspired by poststructuralist thinking and rhizomatic models of identity as open/moving systems of thoughts (Deleuze & Guattari, 1983), our purpose is not so much to uncover but to empower a re-patterning of these systems. Nevertheless, our development of the Dovi-river interview was also motivated by the above arguments about drawing as means to facilitate children's engagement and communicative capabilities, and as a more effective way to capture the complexities of children's experiences compared to adult-centered approaches.

## **Child participation in sociological childhood studies**

Within sociological childhood studies, notions such as collaborative, participatory, involving, child-led and child-centered recur in conference presentations and journal papers. These notions represent a position, as well as a range of approaches, that pertain to how to do research with and for children, and which highlight normative ideals about how proper participatory research with and for children should be done (Wulf-Andersen et al., 2021). The overall idea seems to be that the greater the degree of participation – in the sense of children’s control or influence over different stages of the research process (Hart, 1992) or the multidimensional facilitation of children’s voices (Lundy, 2007; Lansdown, 2011) – the better. Thus, an underlying ideal seems to be to hand over power to children, or to use one’s more powerful position to clear the way for children’s perspectives to be heard and acted upon. However, as we regard children’s identities and perspectives as open/moving systems of thoughts, the task of empowering participatory research and practice is, rather, a matter of creating a space where oppressive discourses can be challenged through the co-creation of oppositional discourses and re-patterning. Still, continuous reflexive awareness of, and a commitment to working with, the power relations (including that of being an adult researcher versus a child) is critical to creating such a space of co-creation.

## **Drawing, metaphors and imagery in the Dovi-river interview**

Although the Dovi-river interview combines elements from different methods, such as life course interviews, drawing, imagery, and metaphors, which are well-known methods within health care research and practice with children, the Dovi-river interview uses these methods somewhat differently than usual. Whereas these approaches share the aim of uncovering chil-

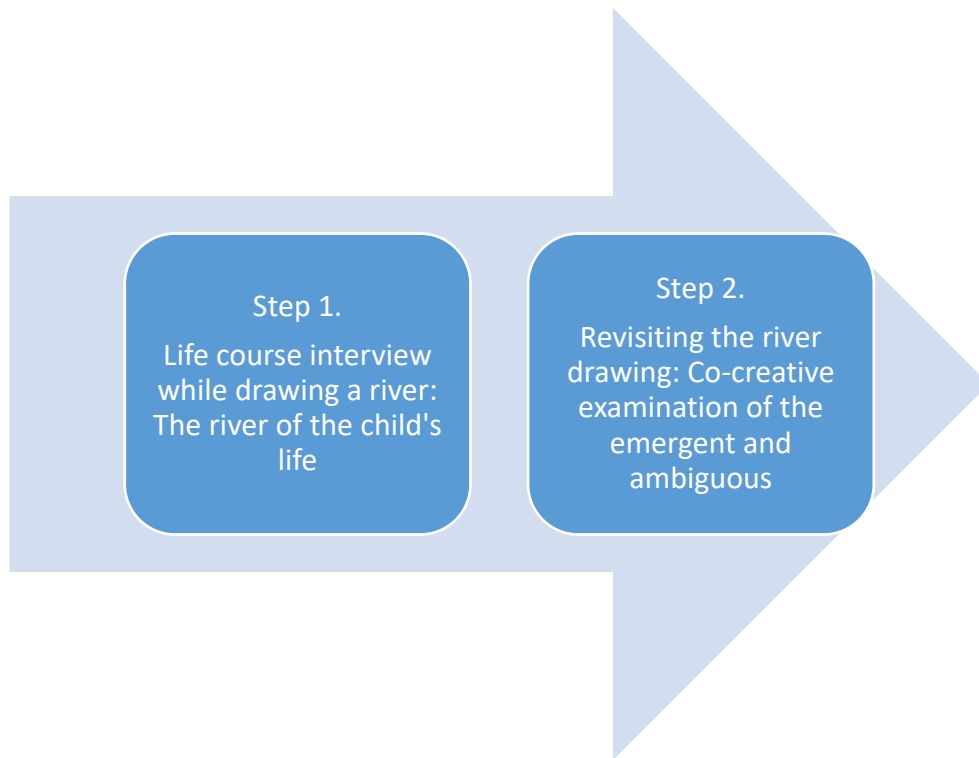
dren's real-life, authentic emotions and perspectives, the Dovi-river interview utilizes metaphors and imagery to frame the interview as a polyphonic dialogue which contains many voices and discourses (perspectives) that criss-cross each other simultaneously with the potential to produce knowledge about unknown and unforeseen possibilities (Bakhtin, 1984). Thus, the Dovi-river interview does not align with or serve the traditional children's rights agenda of voicing an already existing child's perspective or viewpoint. What it does aim to serve is an empowerment agenda by re-constructing children's narratives, countering the strong deficit view and dichotomous understanding of their own experiences of their lives and capabilities.

## **The Dovi-river interview method**

### **The two steps**

The Dovi-river interview method consists of two steps. In the first step, the child is asked to tell their life story, while the interviewer or the child draws a river illustrating the life course. Thus, this part of the interview can be characterized as a life course interview, or using Horsdal's (2017) term, a biographic narrative interview, which is supported by the drawing activity. In the next step, the child and the interviewer look at the drawing for the purpose of co-creative polyphonic examination.

Fig. 1. The Dovi-river interview



While some children feel very comfortable drawing, and might even find it relaxing and stimulating, several scholars (Teachman & Gibson, 2013; Eldén, 2012; Bhagat & Howard, 2018) have argued that not all children feel that way – quite the contrary. Therefore, we chose to let the children decide who should draw the river: the interviewer or the child. During the interview, the drawing serves as a common third. A common third is something outside the participating subjects that both parties can connect with, and which creates a shared focus on something outside the subjects that can be examined in collaboration (Reith-Hall, 2020). Thus, a common third can make it easier to talk about sensitive issues. Moreover, as a conversation tool, a common third enables both pauses and silence to think, feel, and recall memories, as well as to re-pattern. Several scholars have emphasized the productiveness of pauses and silent moments in interviews with children (e.g., Brooke et al., 2020), nevertheless, such voids in the conversation can be emotionally challenging for the interviewer as well as the interviewee.

Therefore, pauses and silence are often interrupted by follow-up questions, or by the interviewee. The common third in the form of the drawing helps to alleviate this urge. Moreover, a playful conversation about what the drawing should look like enhances co-exploration of different layers and interpretations of the situation or experience that the child is talking about. Thus, the playful atmosphere enhances re-patterning, including the researcher's ability to suggest new meaning attributions in a less authority-tinged/powerful manner. In other words, the playful conversation about the drawing enables the practice of emergent listening (Davies, 2015) and a co-creative interview process with space for the emergent and ambiguous.

In drawing the river, various images and metaphors can be included, depending on the imagination and creativity of the interviewer and the child. They can be suggested by the interviewer and then accepted, rejected or modified by the child, or they can be the child's own ideas. Drawing a lifebuoy can, for example, be suggested at the place in the river where the child talks about having received help. Polluted areas or areas with a strong current can be chosen to illustrate difficult periods, exciting periods, or periods with significant changes. In this way, because they are part of the narrative, images and metaphors can also be ambiguous and carry different meanings, thus opening up for multiple stories and interpretations.

Once the life story has been told and the river drawn, we return to various elements (strong currents, rocks, shallow water etc.) in the drawing for the purpose of unfolding possible ambiguities and multi-layeredness: are there places or periods where the child's narrative and use of symbols allow alternative small stories about what happened, or the emergence of experiences and capabilities? Perhaps the child had difficult experiences— but maybe such narratives have more to them than first meets the eye. This is explored as a joint venture between the child and the interviewer in a 'return visit' to talk about the river, its course and the various symbols used along the way (step 2, see fig. 1). In this step it is essential that the interviewer is aware of the

child's reaction and co-creation. The challenge is to ensure that the re-patterning becomes an empowering and playful collaboration, and not merely an adult-led interpretation or re-patterning of the child's life story.

### **The river metaphor**

The river interview is inspired by Percy-Smith and Dalrymple's use of the river as a metaphor for the life course in interviews with children, which they presented at a childhood conference in Sheffield in 2012. However, 'river' is an old and widely used metaphor within health research and practice, in which medical sociologist Aron Antonovsky's use of the metaphor in his salutogenic approach to health is one of the best known examples (Antonovsky, 1987).

Antonovsky took up, and reinterpreted, the long-standing— and in traditional medical science already widely used— river metaphor to describe medical treatment as a rescue operation: the patient is washed up on the banks of a dangerous river. Later, the metaphor was also used in preventive health care to address causes (why people fall into the river) and protection (what can be done to prevent them from falling into the river).

Antonovsky, however, took the metaphor even further. In his salutogenic approach to health, the river was no longer merely a metaphor for a disease, but a metaphor for people's lives. Antonovsky argued that the purpose of the health system isn't to save people from the river, but rather to ensure that they learn swimming skills that enable them to tackle the challenges that are an unavoidable part of being in the river, that is, of living (Antonovsky, 1987).

In the Dovi-river interview, we bring Antonovsky's river metaphor for life itself into qualitative interviews with children and youth. However, while Antonovsky focused on resilience as enhancing people's swimming abilities, we focus on experiences of, for example difficulty, inadequacy, shame and inferiority as possible double-sided stories, and playfully explore

whether anything can be said about these situations that adds complexity and polyphony. For example, if a child has handled a difficult situation in a creative or significant way, this can be explored as a resource, recognized and added to their identity narrative. Or the co-exploration of a child's harmful experiences of exclusion could break with individualization, adding narratives about unjust structures and visions for inclusion.

Metaphorically, we recognize that swimming in dangerous waters may cause harm, wounds, and scars as well as help to improve swimming skills. Exploration of this double-edgedness is in focus in the second step of the Dovi-river interview.

### **An example**

In the following, we present one of our Dovi-river interviews step by step. It is an interview with a boy whom we will call Thomas<sup>2</sup>. Thomas was 17 when Signe interviewed him. He has cerebral palsy (CP) and is dependent on his electric wheelchair. CP affects his pronunciation but does not affect him cognitively.

When Signe interviewed Thomas, it was not a classic, one-on-one interview situation. The purpose of the interview was that Thomas and another 12-year-old boy, Max, who also had CP, were to help Signe and her colleague, Emil, to explore the resource potential of living with a physical impairment. Thomas and Max were recruited through posts on various websites, including a video on Facebook. They chose the location for the interview. They and their parents gave their informed consent, including consent to our use of the drawing in publications.

During this interview, there were four people in the room, and the Dovi-river method was used to map both Thomas' and Max' life course. Signe explained the method to them, emphasising that it was up to them to decide how to tell the story, what to include and what to draw. One

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<sup>2</sup> Thomas is not his real name, but a synonym name we gave him in order of anonymization.



boy at a time told their life story. Meanwhile, Signe drew their rivers, while Emil asked facilitating questions and wrote notes about the conversation.

The interview unfolded as a co-creative process conducted among the four people present. Signe also asked quite a few questions, while the two boys gave instructions for exactly how to draw the river, including its twists and turns, elements etc. Besides the river, drawings visualising the boys' stories surrounded the river such as a horse, trees and an ice cream. In addition, the two boys also commented on each other's stories and related their own experiences to each other's. We will now turn to the process of drawing and exploring Thomas' river.

**Insert picture 1 “Thomas’ river”, here**

During the interview, Thomas talked a lot about his various leisure activities. He had played electric hockey, been a scout and engaged in youth politics. Utilizing the river metaphor, he talked about how his disability had given rise to a series of challenges, and that he had sometimes doubted whether he could swim or would drown. As an example, he mentioned that there was no chance he could earn the ability badges that his scout peers strove for, such as the tree-climbing badge, which meant that he was excluded both from the activity and from the related social life and associated recognition. However, as he explained during the river drawing session, he had had an idea for an activity that could earn him an ability badge – namely spotting different kinds of animals.

In step 2 of the Dovi-river interview, where the river drawing is re-visited, all the attendees (Thomas, Max, Signe and Emil) talked about Thomas' life with reference to the drawing. The drawing became the common third, they laughed about Signe's poor drawing skills and in the

process they talked about and unfolded the images and metaphors. In that way, the exercise further developed into a co-creative, polyphonic examination of the river, where Thomas with his different metaphors and stories pointed to difficult parts of the river (spots of dangerous water). At the time of Thomas' life when he had been a scout, Signe pointed to her drawing of a tree at the riverbank to symbolize tree climbing, children able to walk and climb, a wheelchair user, ability badges, and a bird to be spotted.

The conversation then proceeded as follows:

Thomas: *"Yes-- and that is to explain that there are things I cannot do, and then I find something else I can do instead"*

Signe: *"And just on that note, I actually think I should do it like this [draws a thought bubble around the bird and the badges]. You get an idea when you cannot do this [points to the tree]. Should we put a dash on it?"*

Thomas: *"Yes."*

Signe: *"Then you get some other ideas – find things that you can do within this framework. (...) And I think that, at least, when I look at whether there are some special resources or some special skills, then I think... this is a special skill you have, to be able to find some other ways you can be a part of the activity."*

Thomas agreed and elaborated on how several times throughout his childhood he had experienced that there were activities in which he could not participate. The poor accessibility for disabled people had challenged his participation in communities and activities. These experiences had been frustrating and painful, however, they had also triggered creative thinking. The return to dangerous spots, including how, during the 'spotting bird badges' episode, Thomas succeeded in overcoming the danger of exclusion and lack of recognition through creative

thinking and innovation skills, allowed a co-creative reconstruction of Thomas' capabilities and identity, beyond the 'spotting bird badges' episode. Thomas and Signe could thereby dialogically recall how he had used these creative thinking and innovation skills several times throughout his life to navigate through other "spots of dangerous water" which had, at the same time, given him the confidence to swim out into deep water. Before the interview, these competencies had not formed part of Thomas's self-narrative and were not present in his first account of his life story.

## **Discussion**

### **Ambitions to be inclusive – easier said than done?**

In the example, Signe appears to be the driving (or at least initiating) force in identifying Thomas' creative thinking and innovation skills. Thus, from an essentialist perspective, one could argue that although Thomas follows up by elaborating on how he had also practised creative thinking and innovation in other exclusion situations, the story was planted by Signe rather than authentically reflecting Thomas' perspective or life course. However, if the perspectives and agency of any human being, child or adult, are relational and subject to structures and power relations (Esser et al., 2016; Spyrou et al., 2018; Warming, 2022), as argued at the beginning of this article, searching for any authentic perspective is an absurd endeavour that risks reifying those very power relations. We aimed to challenge and overcome existing dominant narratives by producing new, multi-layered, ambiguous and complexifying narratives by identifying and inviting co-creative elaboration over small and emergent oppositional stories. What Signe did was to identify and invite – and Thomas took up the invitation. What is critical is whether Thomas found the invitation (and co-created narrative) meaningful. Our assessment, based on

his engagement in the debrief and feedback after the interview, is that he did. However, in other cases, we have also experienced children who did not find our identification of small and emergent stories meaningful, and then of course we had to drop the stories. Thus, we strove to position the child as the expert who got to decide which oppositional perspectives were to be included. We did this by making this explicit to them, and by being attentive to their verbal as well as non-verbal communication of (lack of) meaningfulness. We regard this attentive stance as essential to practicing what Canosa, Graham and Wilson (2018) call ethical mindfulness. In situations involving several children, as in the interview with Thomas, we aimed to position the child in focus as the expert about their own life and identity narrative, whereas the researchers and the other participating child (Max) were positioned as assistants and playmates. Admittedly, this is not an uncomplicated ambition, as children and researchers are already pre-positioned (Wulf-Andersen et al., 2021). The point that an ethical participatory practice, not least with children, requires ongoing reflection and work with power relations for the purpose of ethical symmetry (Punch, 2002; Christensen, 2004; Wulf-Andersen et al., 2021), also applies to the Dovi-river interview method, whether used for research purposes or in health care practice. However, small “tricks” may also make a difference, for example, if the researcher/facilitator is not very skilled at drawing. As shown in the example above, Signe was not too proud of her drawing skills, but she offered to draw nevertheless. Thomas and Max didn’t comment on the quality of her drawing, but on her slowness. Max said: *“I am helping you. It will take too long for you to draw all the stones yourself.”* Thus, the drawing became a joint project – not only through the conversation about what the drawing should look like and which metaphors to use, but also through the practical act of drawing. Here, Max took over the collaborative process by identifying a new role for himself in the drawing of his river (below) and positioning Signe as somebody needing assistance.

## **Insert picture 2 "Max' river", here**

Nevertheless, the river as the overarching metaphor sets a particular frame for the interview, a frame that the children, although they can choose to reject it, did not choose themselves. Due to the progressive currents of the river, as a metaphor it may risk setting a similar frame for the child's story, namely a progressive one – in case the child associates a river with progression. As with most metaphors, the river can awake different and even contradictory associations, e.g. progression and recurrence. A way to avoid a potential progression framing is to invite for the contrasting association and leave the shape and the many potential twists and turns of the river for the child to create, making it possible for the river to transform into a small stream, a swamp or even an ocean. The implications of this can rightly be debated, especially when the endeavour is to challenge the dominant meta-narratives and voice messy, complex, and ambivalent multi-layered experiences and identities. The strength, however, is that the river as a continuous narrative is a narrative that is recognizable, and (for most) easy to tap into when they are asked to tell their life story. Still, working with power relations throughout the interview is essential and poses a persistent challenge. This requires that the researcher is extremely responsive to the child (including non-verbal communication) and at the same time open, and prepared to be curious together with the child about whether the interpretations are true to the child's intentions or if they should be re-patterned.

## **Is the method suitable for all children?**

The immediate answer is 'no, drawing does not necessarily appeal to all children' (Bryan et al., 2019). Moreover, as Patterson and Hayne (2011) point out, older children's self-consciousness

about their drawing skills, and the standards they set for themselves, can play a negative role. However, as we saw in the interview with Thomas, the child does not necessarily have to be the one doing the drawing.

We have also had experiences with children and young people where the method itself did not fit with their preferred mode of communication. For instance, a young girl responded to Hanne's explanation and invitation to work with the method with the following words: *"I will tell you my life story, but we are not going to draw a river here. You are welcome to draw it... when you return home."* This girl was the only one who so explicitly opposed our agenda. The explicit nature of her opposition made it easy to hear and react to, whereas it is harder to "hear" more silent or implicit forms of opposition, for example if a child's body language indicates lack of engagement and meaninglessness, even though they are complying verbally. Here, emergent listening to the children's protests, coupled with a flexible interview process, are critical to "create[ing] a safe and dialogue stimulating space" (Teachman & Gibson, 2013, 271).

While the Dovi-river interview method was developed primarily to suit children, it could potentially be helpful in health research and practice with adults too. This is in line with Kirk (2007), who argues that novel techniques used in qualitative research with children might be equally helpful in research with adults. However, just as with children, the method is unlikely to suit all adults. Moreover, the flexible and responsive implementation of the method will enable it to be tailored to most people, child or adult. It is, of course, a prerequisite that those being interviewed have the cognitive abilities required to use metaphors. We don't find it appropriate to utilize age categories in defining the applicability of the method, as age may not necessarily indicate such abilities. By using such categorizations, we would risk discrimination and losing a significant potential by excluding younger groups of children (who are already

often absent in research due to assumptions of lacking abilities). Instead, we encourage a curious and exploratory approach to the method. In that connection, our experience is that the method can be adjusted by, for example, using simple metaphors, thereby making it more widely applicable.

### **Limitations**

Besides not being a method suitable for all children and adults, a limitation of the Dovi-river interview method is the required interviewing skills in terms of emergent listening and ethical mindfulness, and the ability to not let either the river metaphor or suggested smaller metaphorical images (such as rocks, shallow water or a lifebuoy) be too leading and controlling. Moreover, the method does not comply with or serve approaches which seek to unambiguously uncover the child's life story or identity.

### **Conclusion**

In this article, we have introduced, demonstrated and discussed the potential of the Dovi-river interview method in qualitative health research with children. By alternating between drawing the river, discussing the drawing (including co-creating ideas, negotiation, and adjustment) and the child narrating, this arts-based method allows for a joint exploration of life experiences, and invites additional meaning-making with room for both the emergent and the ambiguous. Together, the interviewer(s) and the interviewee get to investigate how challenges experienced can both enable and hinder the flow of the river, and how such challenges can sometimes give rise to new directions and currents (which again can be both challenging, enabling, or neither). We have illustrated how the use of additional metaphors such as rocks and deep water can underpin the exploration and ease conversations about sensitive or maybe even traumatic topics and experiences. Such use of metaphors can enable the articulation of children's perspectives

(Patterson & Hayne, 2011; Woolford et al., 2015) and facilitate a space where children can concretize their emotions (including conflicting ones).

Throughout the article, children in vulnerable positions, and more specifically children with disabilities, have served as an example. The Dovi-river interview method offers ways to address the challenges we often see in health research and practice with children, and these challenges are particularly present when it comes to disabled children and children in vulnerable positions, that is, groups whose experiences and perspectives are often overseen, and whose lives are perceived as unambiguous, flawed and sad (Lansdown, 2011; Falster, 2021; Falster et al., 2022). If Dovi-river interviews were implemented in healthcare practice, the involved children might experience a greater sense of recognition. Based on our experiences from the two projects, we propose that this approach also holds the potential to foster hope and faith in their life quality and future among parents, professionals and the children themselves. The results, both from the project on children in social care and the project on children with disabilities, indicate that the method has the potential to achieve this. That said, the potential of the Dovi-river interview method reaches far beyond health research with children, thanks to its ability to oppose mono-vocal, unambiguous narratives and identities. The method's potential to enable the voicing of messy, complex, contradictory, and disrupting power relations can hopefully inspire qualitative research more broadly.

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