

Part of Me: Where Identity, Creative Ageing and Conventions of Dramatic Action Meet

[BOB SELDERSLAGHS](#)

ROYAL CONSERVATOIRE, AP UNIVERSITY OF APPLIED
SCIENCES AND ARTS, ANTWERP

ABSTRACT

This practice-based piece explores Part of Me, a creative ageing approach developed within a residential care home in Antwerp, inspired by Dorothy Heathcote's Mantle of the Expert and conventions of dramatic action. Moving beyond dominant ageist narratives that reduce residents to a single identity of dependency, the practice invites older adults to (re-)engage with meaningful roles—from their past or present—through one-to-one dramatic inquiry. Using embodied, sensory, and narrative techniques, participants represent and explore a personal role and different points of view, often uncovering new perspectives on their own (hi)stories. The research to which Part of Me is linked, aims to contribute to the field of creative ageing by proposing an adaptable, arts-based methodology that bridges artistic, educational, and care practices, with potential for integration into interprofessional training and broader healthcare settings.

INTRODUCTION

What could Mantle of the Expert—Dorothy Heathcote’s approach on teaching and learning, based on dramatic inquiry—contribute to the context of elderly care? With a distant background in nursing and an ongoing practice in drama and research, that question led me to contact a residential care home for elderly people in need of care in Antwerp two years ago. Could the creation of fictional worlds in which participants have authority, make decisions and bear responsibilities, empower older people experiencing physical, cognitive and social challenges, just as I have observed with children and young people over the past decade (Selderslaghs, 2020)? What opportunities and challenges would creating stories together with this specific group of participants entail, in which we collectively operate as playwrights “caught in the present, bound by the past, and impelled toward the future” (Heathcote & Bolton, 1995, p. 190)?

Earlier this year I published an article in Drama Magazine about my artist-in-residency and the group sessions with Mantle of the Expert at Armonea Dageraad Residential Care Home, reporting on the potential of the approach to transcend institutional boundaries and promote well-being (2026). In that article, I report on a weekly practice that I started in July 2024. It involves organising storytelling sessions with a (slightly) varying group of eight to sixteen elderly people in need of care, including people with and without (early-stage) dementia and people with and without physical limitations.

In this practice-based piece however, I wish to highlight a creative ageing practice that I developed in relation to individual residents and which aims to create a broader view of their identity. In everyday life, it struck me that as a society we often tend to look at senior citizens in residential care homes solely through the lens of a single identity—that of elderly people in need of care, an issue closely linked to ageism: “stereotypes (how we think), prejudice (how we feel) and discrimination (how we act) towards others or oneself based on age”:

Half the world’s population is ageist against older people (...) Ageism can change how we view ourselves, can erode solidarity between generations, can devalue or limit our ability to benefit

from what younger and older populations can contribute, and can impact our health, longevity and well-being while also having far-reaching economic consequences. For example, ageism is associated with earlier death (by 7.5 years), poorer physical and mental health, and slower recovery from disability in older age. Ageism also increases risky health behaviors, such as eating an unhealthy diet, drinking excessively or smoking, and reduces our quality of life. In the United States, one in every seven dollars spent on health care every year for the eight most expensive conditions was due to ageism (US\$ 63 billion in total). (World Health Organization, 2025)

What if we were able to adopt a flexible view of identity that embraces the child, sister, student, colleague, father, friend, neighbour, lover... in each and every one of us? Could that make a difference to how we think, feel and act towards elderly people?

JULIENNE, LOVER



Figure 2: Julienne, lover (name altered)

Julienne (81) is sorting CDs when I knock on her door. She lets me in and puts two more boxes on a separate pile before we sit down: Mozart can stay, but an old eurovision song contest album has to go.

"Sois humain et donne-moi une réponse!" (Be humane and give me an answer!)

With that sentence—spoken by Amir—Julienne embarked on the role of her life: that of being a lover.

Julienne met her muse one evening while out with her friends at 'De Muze', a famous Antwerp café. Amir was a handsome Algerian man, one metre ninety-four tall. After some persuasion, she began corresponding with him, travelled to Paris to meet him, and from there they travelled together to London and later to Milan and Algeria. Time and again, Julienne returned to Belgium alone. What followed was a long-distance relationship that lasted 25 years: 300 months filled with letters, phone calls, short and long journeys. It wasn't always easy, but it was worth it: "Yes, that's what I wanted in my life, to experience such a passionate love that everything normal had to give way to, and that's what I got".

When Julienne talks about her visits to Algeria, the scent of lemon comes back to her as she imagines stepping off the plane. She sees the veiled women again and hears the Arabic songs of Umm Kulthum.

Julienne would advise her younger self not to get involved—because it's not all sunshine and roses—but she lets the young Julienne answer: "I can't help it. I'm so in love!" She smiles as she says this. She looks back on that turbulent period in her life with fond memories. Even though the fire couldn't stay burning. It was too intense.

Julienne protected herself, she says. When I ask her how she did that, she surprises me once again: "By taking in sixteen Chihuahuas and three cats! Then I couldn't leave home anymore". Amused, she gets up, rummages in her cupboard and proudly shows me three photo albums filled with these other great loves of her life.

Sixteen Chihuahuas and three cats later, Julienne thanks me for highlighting the "role of her life" and returns to the order of the day:

after all, those CDs are not going to sort themselves.

From the very start of my artist-in-residency, the intention was not to focus on reminiscence, but to create new worlds that the participants themselves could shape and direct. To challenge them to engage in unfamiliar situations and solve problems they had never encountered before. To not delve into one's own past or limiting oneself to it, but to make space for a "vision of the possible" (Heathcote & Bolton, 1995, p. 170). Naturally, spontaneous memories regularly surfaced among the participants during the group sessions. I noticed that the residents were often surprised by the little personal anecdotes others shared with them. Although they had often been living under the same roof for years, they seemed to know each other barely at all. I got the impression that the usual activities in the care home were often focused on "keeping busy" and "passing the time"—pleasant at best, but not always fostering a deeper connection between the residents. Not only the people around them, but also the residents themselves often seemed to reduce themselves to the role of "elderly people in need of care" and no longer made the effort to form connections with fellow residents.

"One man in his time plays many parts," wrote Shakespeare in *As You Like It* (1623/1993). But in a care home, those "many parts" often seem to have disappeared. It inspired me to apply one of the drama elements from *Mantle of the Expert* to Shakespeare's famous quote. What if I were to apply conventions of dramatic action in a one-to-one session to explore at least one role that residents love(d) to play in their lives (Heathcote, Johnson & O'Neill, 1984, pp. 166-167)?

During one of the group sessions, I asked the residents who might be interested in a one-to-one storytelling session. This would allow us to explore in more depth an aspect of their lives that they would like to talk about. Eight residents, three women and five men aged between 62 and 88, accepted the invitation. Between June and October 2025, I visited them individually for a single one-and-a-half-hour storytelling session. The residents chose the location themselves: one resident opted for a session in the garden, one in the multi-purpose room and six in their own rooms. They all resided at Armonea Dageraad in the city centre of Antwerp in Belgium, a care home specialising in psychogeriatrics—the care of people with conditions involving limitations of mental abilities (psycho) at an advanced age (geriatrics).

FONS, STUDENT



Figure 3: Fons, student (name altered)

In his imagination, Fons poses as a young political science student in front of the courtyard of the University of Antwerp: I have to picture him in dress trousers, a shirt and a tie, he says. "And much thinner", he adds with a laugh. "I always thought: I'm going to go into politics. Then you can help people". But little came of his

political ambitions: he went to work for the National Labour Council: “the highest body for consultation between employers and employees”, he states proudly. He mostly remembers a lot of meetings...

Fons likes to go back to his student days. A time when he wasn't yet struggling with manic depression. And when he didn't have to search so hard for the right words. The young student had a reputation for being a whizz kid: “People looked up to me a bit, but I didn't get a big head or anything”, he assures. What his fellow students and professors didn't see was the pressure to perform: his parents let him go on to higher education on the advice of his secondary school teachers. But failing a grade was not an option. His working-class family bent over backwards to send Fons to university. The pressure that this entailed still resonates in his advice to his fellow students: “Go to class, because they take attendance!” And also in how he addresses his younger self: “If you don't want to fail, start taking notes from the beginning!” Advice that 20-year-old Fons didn't really need: he always passed with flying colours.

After his bachelor's degree in Antwerp, Fons went to Leuven for his masters. “It was only in Leuven that we all came into our own as students”, he smiles. Attending classes became optional. There were cafés beckoning, cinemas and concerts. “And dance parties!” He's starting to remember more and more: “The smell of the Alma, the famous student restaurant!” (...) “Herman Van Veen's very first performance in Flanders, in the auditorium. That was huge... Huge!”

And then suddenly the memory of the student protests of 1968 comes back: “That was the time of the big fights with the police”. Fons sees the water cannon coming towards him again. Fortunately, he was not in the front line himself, so he was not blown over like his fellow students, but he relives the cat-and-mouse games with the policemen vividly. His friends who were less fortunate were shivering with cold—“it was winter, in January!”—arrested and locked up in the gendarmerie barracks. The student doctor argued with the district commander—“the big chief”—and won his case: the students were released.

Fons puts his hand on his head and remembers another uprising in which he was at the forefront: "I got hit on the head with a truncheon", he says with a pained grimace. The pain lingered in his head for a long time. But now he can laugh about it. "It was an exciting time", he concludes, "an exciting time".

Fons hasn't been a student for almost 60 years, but the role is still firmly anchored in him: quite conscientious, but also rebellious, smart, humorous, cautious, and above all, inspired.

As we say goodbye, he calls out just before I walk out the door: "If you see a policeman on the street, run, okay?"

Traditionally, conventions of dramatic action allow us to represent and reflect on objects, people or events that are not (or cannot be) physically present in the room. In this case, the protagonist—the subject of representation—is actually present, but depending on the choice made, it is a role that the participants either still play or no longer play. But whichever role they choose, they are experts in it regardless. In my interventions with individual participants, we explored their chosen role from different perspectives using various conventions. I invited them to represent the role "here and now", as a statue or in a photograph that can be brought to life, or we explored it through objects, clothes, stories, documents...

To be very specific, I began each individual session by explaining my research and asking the resident involved if they would like to take part voluntarily. The care manager confirmed the participants' right to self-determination and their ability to exercise it, after which they gave their consent to the use of data and audiovisual material via a consent form. I then began a conversation with them about the many roles we (have) all play(ed) in our lives, and whether there was a particular role they would like to talk about. I deliberately chose to highlight a role they viewed positively, as a moral choice: I felt it was important—as Heathcote describes it—that the participants would have a 'fulfilling experience', not focusing on 'a vision of human failing', in order to avoid the session taking on a therapeutic character (Heathcote & Bolton, 1995, p. 170). Heathcote's list of conventions of dramatic action inspired me to ask questions that enabled the participants to

explore their chosen role through various iconic, symbolic and enactive representations. Questions such as:

- If I were to see you in the role of (...), what might I notice first? What kinds of things would you usually be doing in that role? Do you have any particular routines as (...)? Could you show me? (inspired by convention 1)
- If someone filmed a short moment from your life as (...), what do you imagine I would see? (i.b. convention 2)
- If you were to sketch an image or photograph of yourself as (...), what would it look like? (i.b. convention 5)
- What would strike me most about you as (...)? What sort of 'reputation' do/did you have in your circle as (...)? What are/were you known for in the neighbourhood? What might people say about you as (...)? (i.b. convention 6)
- If that image (or the figure in that photo) – you as (...) – could speak: what would it tell us about what's going on? (i.b. convention 7)
- If I were to ask you as (...), 'what is the most important thing in your life', what would you answer? And if I were to ask you 'who is the most important person in your life?' (i.b. convention 4)
- Has that (most important) person ever said anything that has always stayed with you? Is there a gesture that reminds you of him or her? (i.b. convention 25)
- How do you think that person would describe you as (...)? (i.b. convention 16)
- If that person could write you a letter today, what might it say? (i.b. convention 23)
- Is there an object that is/was important to you as (...), that you value(d), or that you use(d) a lot? Which object would someone recognise you by as (...)? (i.b. convention 15)
- ...

To be clear: this questionnaire is non-exhaustive and was never used as a 'tick-box list', but provides a few examples of questions that prompted a deeper conversation and further exploration of the chosen role.

It was not uncommon for participants to discover new aspects of

the role they thought they knew inside out. For instance, the highly self-critical Walter was surprised by the positive response when he portrayed his late wife answering my question as to why she had chosen him as her partner. “The fact that I’m saying this—it’s never even crossed my mind”, he remarked, pleasantly surprised by his own spontaneous representation of his wife, who described him as a caring and patient husband. Looking at memories through a different lens, from a different position, from a sensory or embodied perspective, opens up new perspectives on the past, I observed, and empowers residents. It makes them realise: this is a part of me, a part that made a difference and still does.

FREDDY, PLASTERER



Figure 4: Freddy, plasterer (name altered)

Freddy portrays his role in a still image: as a 14-year-old, he is on an apprenticeship contract with his father as a plasterer. He is dressed entirely in white, but his clothes are dirty and dusty. He

tears open a bag of plaster, cuts it out and the dust flies up in a cloud. Freddy describes it as if it were yesterday. I have never heard him talk so enthusiastically and extensively. Past and present intertwine: "I get a kick out of it. I still do it, together with my brother... Except when I'm here". Past, present and future merge into one.

He elaborates on lime, glue and hair in the mortar ("that's how it started"), on reinforcing bars, "trowels that have to be sharp", on polishing, compressors and spraying machines. He learned the trade from his grandfather to his father and from his father to him. And he is good at it! His aunts and grandmother confirm this: "You were born for it", he lets them say.

At the same time, he still remembers the playful 14-year-old plasterer he used to be: how he teased his father and grandfather by pushing holes in the plaster that had not yet hardened (with them swearing profusely). Or how he built a camp with his old school friends, after work hours, "with real roof tiles and wooden pallets, and a cement floor". His eyes sparkle with the mischief they got up to together.

We end on a musical note: "Yesterday, all my troubles seemed so far away". He can still hear The Beatles playing on the radio in the room during the plastering. When Freddy talks about his role as a plasterer, all the big and small problems do indeed seem far away.

With the residents' consent, over the past few months I made audio recordings of our individual sessions, which I subsequently edited into an audio story that I gave back to them to thank them for letting me into their world. Listening to their "own" story—which, unlike during our one-to-one sessions, took on a coherent and logical flow—frequently moved the residents and reaffirmed them in an important role in their lives. It also enabled them to share this part of their lives with their fellow residents. Several residents were keen to share the audio stories during a group session, where they listened and responded to each other's stories attentively, thereby fostering a sense of connection. After listening to Julianne's story, Fons put it this way: "That surprised me. I had no clue about that part of Julianne's life. I feel

much closer to her now,” which brought a big smile to Julianne’s face. Julianne herself said she was amazed by the accuracy of the picture painted in the audio story: “That’s exactly how it was,” she said, “I can picture it all again.” And also: “I could listen to it over and over.” Other participants seemed to perk up when they heard their own stories and began to talk about them in more detail, much to the delight of the other residents. Like Freddy, who once again framed his working relationship with his father, or Francine, who seemed to grow a few inches in her wheelchair at the memory of her former status.

FRANCINE, TRAINING MANAGER



Figure 5: Francine, training manager (name altered)

Francine is wearing a blue two-piece suit and high heels. She walks amongst her trainees at the Marks & Spencer training centre on the Meir, the main shopping street in Antwerp. A brief respite from the piped music downstairs in the shop. She is 45 and at a

turning point in her life. Although she is a jack-of-all-trades, Francine most fondly recalls those few years when she trained shop assistants on how to place orders correctly and how to make the smooth transition from the Belgian franc to the euro. “Patient”, is how she describes herself, and her trainees agree.

What she doesn't yet know at that moment is that Marks & Spencer will be closing its doors in Belgium, that her beloved 22-year-old son will soon be leaving home, and that she will leave her husband shortly afterwards. But those worries seem a long way off in her heyday as a training manager: “I drew a lot of satisfaction from it”, she says. She looks back fondly on her classroom full of “chairs with those little clipboards for writing on”.

For Francine, there seems to be a life before and after 2001, the year in which M&S decided to cease all operations in continental Western Europe. As far as she's concerned, the 20th century could have lasted a bit longer. Even today, she's still in touch with her former colleagues via a WhatsApp group of Marks & Spencer retirees. They keep each other updated on their comings and goings since the closure of “their” British department store.

We chat a bit more about the unique products that M&S sold in Antwerp, particularly for lovers of English cuisine. “But clearly there weren't enough of them”, she sighs, before kindly asking me to hand her her hairbrush before she poses for the photo. The suit and high heels are a thing of the past, but the proud instructor is still in her blood.

In my current research at the Royal Conservatoire of Antwerp, which I am conducting together with fellow teaching artist Lies Vandeburie, I aim to further develop and expand this practice, and delve deeper into its impact on the residents and their residential care community (Crossroad in Creative Aging, 2025-2027). I am also curious to explore how a ‘desired’ role might feature in *Part of me*, and whether this practice can be effectively applied by healthcare professionals.

In our practice-based artistic research project, Vandeburie and I take different paths using a mixed-methods approach (ethnographic research, interviews, case studies, experimentation) and find

crossroads where we can challenge, stimulate, compare and test one another as an artistic research community. But our goal is a shared one: to explore drama and theatre as a means of connection for elderly people in need of care, with and without dementia; to focus on active artistic participation as a sustainable practice (with the implementation of creative ageing in arts and care training programmes); to identify the challenges and strengths of cross-disciplinary collaboration; to explore the artistic-pedagogical value of creative ageing for teaching artists; and to examine how theatre can break down the walls of the care home and foster engagement with and from the local community.

This *Part of me* practice will, from 2026-2027, be incorporated into “Interprofessional Collaboration in the Arts”, a new joint module of the Bachelor’s in Occupational Therapy and the Educational programmes in Dance, Drama and Music at AP University of Applied Sciences and Arts in Antwerp. In this module, students from arts and care programmes will jointly develop participatory art practices in socially challenging contexts and learn to collaborate interprofessionally. Consider it a response to Heathcote’s question “what sort of society do we want?” To use the words of Betty Jane Wagner in *Dorothy Heathcote: Drama as a learning medium*: one that puts our “energy on what is at the heart of not only theater experience, but all of our life as well: the process of identifying with the experience of another person.” (1976, p.147). After all, that is where connection is born, something the world desperately needs, now more than ever.

SUGGESTED CITATION

Selderslaghs, B. (2026). Part of me: Where identity, creative ageing and conventions of dramatic action meet. *ArtsPraxis*, 13 (1), pp. 137-154.

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AUTHOR BIOGRAPHY

Bob Selderslaghs holds a Master's degree in Drama, a teaching certificate and a PhD in the arts. He works as a teaching artist, researcher and head of the Educational programmes in Dance, Drama and Music at the Royal Conservatoire of AP University of Applied Sciences and Arts Antwerp (Belgium). He is chair of CORPoREAL, a research group which focuses on embodiment in the performing arts. He conducts his own research into drama in education & education in drama, teaching artistry and creative ageing. He has published several books and articles, primarily on Mantle of the Expert and process drama.