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Published in:
Journal of Aging Studies

DOI:
10.1016/j.jaging.2021.100978

Publication date:
2021

Document Version
Publisher's PDF, also known as Version of record

Citation for published version (APA):
Christensen-Strynø, M. B., Phillips, L. J., & Frølunde, L. (2021). Revitalising sensualities of ageing with Parkinson's through dance. *Journal of Aging Studies*, *59*, 1-10. Article 100978. https://doi.org/10.1016/j.jaging.2021.100978

Journal of Aging Studies 59 (2021) 100978

Contents lists available at ScienceDirect

Journal of Aging Studies

journal homepage: www.elsevier.com/locate/jaging

Research Paper

Revitalising sensualities of ageing with Parkinson's through dance

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ARTICLE INFO

Keywords:
Sensuality
Revitalisation
Ageing
Chronic conditions
Parkinson's dance
Curative imaginaries

ABSTRACT

Dance for Parkinson's can be characterised as a growing social movement which has become a worldwide phenomenon that gives rise to new questions about the meaning and importance of dance in relation to intersecting and overlapping identity categories of *ageing* and *chronic conditions*. In this article, we probe into the potentially constructive interplay between the lived experiences of Parkinson's dance as a space of revitalised sensuality and the cultural imaginations and values connected to the nexus between ageing and chronic conditions. Through a dialogic interpretive framework that recognises and ascribes value to the embodied experiences of Parkinson's dancers, we analyse how the experiences of living with Parkinson's as a chronic condition in the context of ageing are in interplay with the experiences of dancing as an embodied sensual activity. Consequently, we propose that, by emphasising the critical value of stories told by Parkinson's dancers, we are able to gain a more nuanced understanding of how Parkinson's dance affects the nexus between ageing and chronic conditions in revitalising and sensual ways.

Introduction: Parkinson's dance in the nexus between ageing and chronic conditions

> Just like Argentine tango, it [ballet] has a very beautiful body language. I used to dance Argentine tango with my wife for several years. We got captivated by tango in South America, and we wanted to do something together. We thought it was a lot of fun. It's appealing, and there's a certain style to it. It really expresses man and woman; the gender roles are very clear. But the ballet, I think, is very beautiful because it's almost a language of art. The body performs beautiful movements – that is if you can actually perform them [laughter] (Eskild, age 73).[1]

This is from a conversation with Eskild, a male Parkinson's dancer, storyteller and co-researcher, in a collaborative research project about dance for Parkinson's rooted in the experiences of 43 dancers with Parkinson's disease and their relatives. Here, Eskild expresses an aesthetic exaltation on his discovery of ballet-inspired Parkinson's dance, and he contemplates its similarities to and differences from tango as an embodied sensual activity.

Dance for Parkinson's can be characterised as a growing social movement which has become a worldwide phenomenon (Houston, 2019) that gives rise to new questions about the meaning and importance of dance in relation to intersecting and overlapping identity categories of *ageing* and *chronic conditions*.[2] While dancing, both as a social activity and an artform, carries with it a large number of traditionalist and derogatory connotations of fixed body ideals, physical abilities and aesthetics, several researchers point to its immense critical and transformative potential as a vehicle for individual and collective self-expression in relation to marginalised communities and 'othered bodies' (e.g., Christensen-Strynø et al. – forthcoming); Hickey-Moody, 2009; Houston, 2019; Kuppers, 2014).

Parkinson's is classified as a chronic, neurodegenerative condition with an average age onset of 62 years (Gibson & Kierans, 2017), and many people who live with the diagnosis – including Eskild and other participating Parkinson's dancers in our research project – are at points in their life where they are automatically inscribed discursively in a

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[1] All Parkinson's dancers are pseudonymised and their stated age is from the time at which the interviews took place.

[2] In the article, we employ the term *chronic conditions* as an umbrella term for *chronic illness* and *disability* which we use interchangeably in order to acknowledge and emphasise the overlaps between the categories rather than their disjunctive properties (see e.g., Douglas et al., 2020). Although, we specifically engage with Parkinson's disease as the analytical subject area, we want to stress that chronic conditions of illness and disability have a significant critical value as a category through which the specific experiences of Parkinson's also extend beyond a particular diagnosis conditioned by and entangled with a multitude of sociocultural and -material contexts.

https://doi.org/10.1016/j.jaging.2021.100978
Received 4 May 2021; Received in revised form 12 October 2021; Accepted 12 October 2021
Available online 23 October 2021

nexus between ageing and chronic conditions. As research has shown, chronic conditions, like Parkinson's, may exacerbate the experience of oldness (Clarke & Griffin, 2008) as well as intensify the inequalities of other social categories such as gender (Pike, 2011). At the same time, late-onset illness and impairment that inscribe previously self-identified able-bodied people into the realm of medical health care may trouble the identity-politicised spaces of the disability rights movement in its hard-won battles against ableist discourses of biomedicine that preserve dichotomised hierarchies of illness versus healthiness (Douglas, Rice, & Siddiqui, 2020; Gallop, 2019).

In addition, the amalgamation of ageing and dancing has been described and analysed as being organised around and through the omnipresence of ideological values of healthism and consumerism in contemporary Western societies (e.g., Clarke & Griffin, 2008; Krekula, Arvidson, Heikkinen, Henriksson, & Olsson, 2017; Pike, 2011). The consumerist translations and adaptations of different forms of dance genres and cultures to the so-called 'grey market' have been critiqued on the grounds that they may exploit a population of older consumers' anxieties in relation to ageist and ableist notions of bodily decay and limitation (Gallop, 2019; Gullette, 2004). In this critique, dancing is viewed and positioned as a part of healthism's aggressive promotion of an active and independent senior life, also dubbed 'successful ageing' (Bülow & Söderqvist, 2014; Krekula et al., 2017; Marshall, 2017; Rozanova, 2009; Sandberg & Marshall, 2017), a term that has been widely and vociferously critiqued within cultural gerontology in general and this journal in particular (e.g., Fletcher, 2020; Jones, 2021; Lamb, 2014).

Furthermore, it has been pointed out that social dance for older people has been systematically underprivileged in comparison to dance for younger age groups, creating an alleged 'age normality' in relation to dance activities (Krekula et al., 2017). Particularly from a commercial perspective, dancing is ascribed metaphorical values such as *liberation*, *vitality*, *sensuality*, *eroticism* and *passion* (e.g., Hewer & Hamilton, 2010; Milton 2010) that discreetly align acts of dancing with quintessential idealisations of youthful – and not least able and fit – bodies and minds. As an emblematic manifestation of biopoliticised docile bodies of the modern state (Foucault, 1978; 2008 [1979]), it is thus possible to draw a straight line between the marketisation of dance for older people, including its emotional connotations, and the performance of active citizenship as a concoction of underlying health-optimising principles that together create increased expectations to bodily abilities in order to avoid further marginalisation.

Thus, critical analyses demonstrate how dancing in relation to the nexus between ageing and chronic conditions, as a position of double marginalisation, disciplines subjects on the basis of normative ideas about bodily health and abilities. However, they do not seem to leave much wriggle room for potential agentive positionings of people of older age with chronic conditions and their dance activities. Rather than adopting this critical perspective and exposing the self-disciplinary subjugations taking place through successful ageing and healthism in relation to Parkinson's dance, we will explore these potential agentive positionings in this article. The article will probe into the potentially constructive interplay between the lived experiences of Parkinson's dance as a space of revitalised sensuality and the (sometimes healthist and commercially informed) cultural imaginations and values connected to the ageing and chronic condition nexus. Instead of casting ideals of youth, bodily ability and gender as exclusively harmful tropes, we want to point to the nuances of particular forms of "*curative imaginaries*" (Kafer, 2013: 27; Sandberg & Marshall, 2017) surrounding Parkinson's dance. In particular, we focus on the creation of spaces in which it is not only possible to re-establish a 'normal' sense of *self* in an everyday life strongly influenced by medically informed rehabilitation and therapeutic treatment, but also to generate potentially empowering and reanimating experiences of aesthetic and embodied sensualities.

In order to do this, we apply a dialogic interpretive framework (Frank, 2010) in an analysis of personal stories told by Parkinson's dancers. This framework recognises and ascribes value to the specific embodied experiences of the dancers. Our analysis focuses on how the experiences of living with Parkinson's as a chronic condition in the context of ageing are in interplay with the experiences of dancing as an embodied sensual activity. We explore the ways in which Parkinson's dance offers intrinsically sensual spaces that renegotiates the ageing and chronically ill body. We argue that, although these negotiations sometimes invoke and reinforce cultural stereotypes and normatively anchored, often conventional, identity positions, bodily self-expression through dance has an important transgressive potential. This potential lies in the re-actualisation of categories of ageing and chronic illness as entities of vitality and sensuality.

First, we contextualise Parkinson's dance as a site of revitalised sensuality existing in a tensional relationship with a number of cultural imaginaries of dancing, ageing and chronic conditions. Second, we outline our dialogic interpretive approach to our empirical field of study, indicating how such an approach can generate nuanced insights into ageing and chronic conditions by explicitly accentuating experiential and embodied ways of knowing in Parkinson's dance and also by cultivating explicit forms of interdependent agency. Then, third, through selected personal stories and excerpts from our ethnographic study, we analyse how Parkinson's dancers' experiences of dancing are connected to, and informed by, cultural narratives of vitality and sensuality. Finally, in the concluding section, we discuss the ambiguous positioning of Parkinson's dance as subject to broader sociocultural notions of and expectations of dancing as a self-disciplining practice relying and resting upon a number of potential reductive and stereotypical understandings of age and ability-related forms of sensualities. Consequently, we propose that, by emphasising the critical value of stories told by Parkinson's dancers, we are able to gain a more nuanced understanding of how Parkinson's dance affects the nexus between ageing and chronic conditions in revitalising and sensual ways.

Revitalised sensualities of dancing with Parkinson's

In order to position Parkinson's dance as a site for revitalised sensuality, it is important to understand its dancing subjects as part of a group that has usually been excluded from discourses of sensuality and bodily pleasure.[3] This may be due to dominant ideas about ageing as well as chronically ill and disabled bodies' cultural inscriptions in processes of invisibilisation and desexualisation (Gallop, 2019; Gullette, 2004; Milton, 2017). However, there are also very few studies that frame the topic of embodied desires for older people with chronic conditions as a matter of fulfilment rather than as a means to combat impending deterioration. In line with a number of queer and crip theorists, Gallop (2019) asserts that late-onset disability automatically invokes the idea of failed futurity as the qualification of a life course rests upon normative expectations of an open-ended future, unmarked by the constraints of ageing, ability and sexuality (*see also* Edelman, 2004; Freeman, 2010; Halberstam, 2005; Kafer, 2013; Muñoz, 2009). Consequently, people of older age with chronic conditions are in many ways culturally devalued from presumed former states of vitality, and it is thus not surprising that people within this group would, then, experience being detached from genuine opportunities of seeking and achieving bodily pleasure. However, dancing as a form of body work is closely associated with different forms of embodied pleasure and vitality (Cooper & Thomas, 2002; Hewer & Hamilton, 2010) and, as such, constitutes an imaginable space for reconnecting disenfranchised bodies with these values. Thus, dancing can be understood as a reclaimed space of sensuality for people with Parkinson's. In this sense, Parkinson's dance is a means of *re*vitalisation and a politicised site of resistance. Of course, there are various reasons behind people with Parkinson's' choice of Parkinson's dance –

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[3] The notion of *sensuality*, to which we refer, is understood in a broad sense of the term as a state of bodily pleasure invoked through the physical senses.

perhaps they have a partner who enjoys dancing, or they see it as an alternative supplement to physiotherapeutic exercising – which also means that Parkinson's dance is not by definition an intentional political manifestation of reclaiming space.

Yet, because the notion of vitality is, in and of itself, inscribed with ageist and ableist logics that assume a decrease of life quality when it comes to categories of ageing and chronic conditions, it is also plausible that the exclusions of older people with chronic conditions from mainstream cultures of dancing produce more subtle forms of resistance that are conditioned by the status quo. *Resistance as incorporation* exists in many forms and has for a long time been an interesting issue of discussion within cultural studies as a significant mode of tension in popular culture as well as in subcultures (e.g., Butsch, 2001; Hall, 2016 [1983]; Hebdige, 2002 [1979]), and has also been emphasised as a tool of endurance in relation to under- and misrepresentation of disability in media and popular culture (e.g., Christensen-Strynø, 2016; Ellis, 2015). Specifically, this means that the signifiers of mainstream culture can be reworked and reappropriated by subordinate individuals and groups as signs of empowerment, for instance, as it is known from drag culture's hyperbolic and clichéd gendered expressions. In relation to Parkinson's and dancing, an example could be the pleasure of enacting and embodying distinctive exotified cultural scenarios and gendered roles in tango, as well as it could be the admiration and attribution of aesthetic value to specific dance genres, such as ballet, as in the case of Eskild at the beginning of the article. However, we also want to stress that subversion might look quite different when it operates through categories of ageing and chronic conditions. Here, the transgressive potential is not necessarily most evident in looking for obvious activist behaviour, it can also be found in the subtle efforts to enable the creation of appropriate spaces in which people are allowed to feel comfortable in their own skin. It is in relation to this that sensuality becomes central to our investigation.

In a study of salsa dancing for women in their mid-life or later, Milton (2017) argues that for many people (especially women) ageing past the middle years, it is common to experience an increased invisibilisation and desexualisation in social spaces in ways that can lead to alienation towards one's own bodily sense of self. In coining the term "safe sensuality", Milton points out how social dance classes can support older people in reconnecting sensually with themselves and to other people within the safe space of the dance class (ibid.: 150). She explains that because salsa dance classes are structured around a number of scripted bodily styles and acts, the women in the study reported a heightened awareness of their bodily and sensory experiences in safe but also pleasurable ways. While the specification of 'salsa etiquette' largely comprised imitative – and seemingly reductive – behaviour, such as dressing up in 'fitted' clothes and complying to strict binary gender roles of male and female participants, the contentment of the participants emerged in the constitution of an explicitly sensually coded space, which was perceived as appropriate exactly because it subsisted within the confines and safety of the dance class. In this way, it is highlighted that by learning and abiding to the rules of the dance class, a space for consensual sensual interactions emerges, thus offering a platform from which it is possible to gain access to explore one's own bodily sense of self. In other words, the transience and boundaries of dance classes allow for people to experiment with their identities in possibly new (or renewed) ways. This shows how dance classes for older people can offer spaces where it may become easier to achieve bodily pleasure which could also very well apply to the issue of creating joy around chronic conditions like Parkinson's. Furthermore, as Milton also suggests, the special attention that is paid to a range of bodily sensations in the different acts of dancing together makes the atmosphere of dance classes intrinsically sensual (ibid.: 155).

While Parkinson's dance may draw on many different dance traditions, often depending on the individual dance teachers' backgrounds and preferences, it shares the characteristics of many other social dance spaces in which both the physical presence and emotional engagement of the dancers are part of the experience (Houston, 2019; Olsson & Heikkinen, 2019). There is the closeness and intimacy of dancing together with other people; there may be eye contact, physical touch, and exchanges of smiles and laughs. At the same time, there are the cultural expectations and ideas of dancing communicated through people's attitudes towards the dance space, and ways of expressing themselves to others through and about their own dancing activities.

In our analysis, we look into some of the ways in which Parkinson's dancers experience dancing as a space of sensuality and social connectedness, and how this is expressed in different ways that are also conditioned and informed by cultural signifiers of older age and chronic illness. Some accounts focus on tangible outputs, such as learning steps and sequences through which predominant ideas of being physically challenged shift from a focus on individual inability to a shared bodily enablement in novel and gratifying ways. Other accounts pay attention to the emotional involvements and implications, for instance, revolving around the complex enjoyment of participating as a dancing body among other dancing bodies. For some Parkinson's dancers, dancing poses a confrontational, and sometimes challenging, space of mirroring oneself in other people living with Parkinson's but, at the same time, several of the dancers in our study also express various forms of delight and comfort related to experiencing being emotionally and aesthetically stimulated by the presence of and embodied connectedness to other dancers, between peers and dance teachers, who in different ways and to different degrees fuel the idea of dancing with Parkinson's as a space of revitalised sensualities.

A dialogic interpretive framework: personal stories about Parkinson's dance as a revitalising practice

Most research on dance activities for older people with chronic conditions has focused on the therapeutic and rehabilitative effects, especially from a biomedical point of view. However, this focus is increasingly being challenged, both from positions within critical ageing studies and dance studies (e.g., Clarke & Griffin, 2008; Houston, 2019; Krekula et al., 2017). One of these is Houston (2019) who notes that the majority of research on Parkinson's dance, so far, has neglected to examine areas of 'living well with Parkinson's' from the view of the dancers themselves. In her comprehensive study of Parkinson's dance in England, she has examined the social and artistic dimensions of people with Parkinson's' dance activities with an emphasis on the dancers' own experiences.

Our research shares with Houston's a focus on dancers' lived experiences. In our project, we cultivated experiential and embodied forms of knowing based on the lived experiences of the Parkinson's dancers; this in ways that acknowledge the productive particularities of embodied difference (Christensen-Strynø et al. –forthcoming) and critically confront the complexities of co-production and participation (Phillips et al., 2021). While Houston frames her study from a dance studies' perspective, ours is situated within a framework of dialogic communication theory (e.g., Phillips, 2011) through which we understand Parkinson's dance as an expression of dialogic ways of being in the world, along the lines of Bakhtin's (1981, 1984, 1986) theory of dialogue. The notion of dialogue, we employ, is informed by the Bakhtinian idea of dialogue as a mode of communication characterised by tensions due to the multi-voicedness and polyphony of different participants engaging in an ongoing exchange of views (Phillips, 2011). For Bakhtin, all human life is inherently dialogic and, therefore, everyday life is saturated with tensions. Bakhtin conceptualises all communication as dialogue in the sense that meaning is produced relationally through the polyphonic, tensional play of multiple voices. In the interplay between voices, meanings are formed but, as a result of the play of difference across voices, meanings – including 'selves' – are polyphonic, multi-voiced, tension-ridden, and therefore "unfinalizable" (Bakhtin, 1986: 118–119).

The dialogic interpretive approach which we apply as an analytical framework builds on Bakhtin and has been developed by Frank (2010).

In this approach, the polyphonic qualities of dialogue serve as a lens through which people's personal and individual narratives, or stories, are validated and attributed value, not only as significant accounts of the particular experiences of the speaking subjects but also through their unfinalisability (Frank, 2005, 2010). According to Frank (2010), a dialogic interpretive approach accepts the inherent ambivalences and complexities of people and their stories (as unfinalisable) and makes it an ethical matter of the analyst not just to *consume* other people's stories, for instance, by focusing on specific critical interpretations in order to reveal an alleged true nature of the story or the storyteller (100−101). Interpretations of people's stories, Frank further asserts, should always take "particular interest in *learning from the storytellers*" (ibid.: 17 – *author's emphasis*), by which he alludes to the fact that many analytical interpretive practices rest upon ideas of singular claims to truth authorised by the analyst (ibid.: 87). This focus is particularly pertinent when doing ethnography in the context of participatory research as we have done in our project and resonates well with our research design in which the participating Parkinson's dancers were also co-researchers who took part in all stages of research, including in collaborative analyses of the ethnographic data (see e.g., Phillips et al., 2021).

Following Frank, we are – as the named authors and disseminators of this article – dedicated to *letting stories breathe* in ways that are not interested in calling into question the authenticity of the narratives and stories of the Parkinson's dancers. This is the case, even though some of these may invoke our ambivalence as analysts by building on conventional assumptions and ideas about ageing, chronic conditions and health. In this article, we seek to pay attention to the ways in which the Parkinson's dancers lived experiences of dancing with Parkinson's constitute a prism of emergent stories from which we can draw important knowledge occurring in the nexus between ageing and chronic conditions. At the same time, we recognise that specific narratives are enmeshed in the terms and conditions of (formalised) cultural expressions and imaginaries, for instance, of *youth(fulness)* as a qualifying marker of dancing. Furthermore, as Frank asserts, stories are *vital* living and *breathing* things which are, among a lot of different capacities, equipped to evoke and arouse emotions through the imagination (Frank, 2010: 41). Hence, the dialogic interpretive approach carries the potential to generate agency and empowerment, which is also a specific subject of concern in connection to the nexus between ageing and chronic conditions. It follows from this that the dialogic interpretive approach is not only an ideal framework for interpreting and ascribing value to the experiential narratives of the Parkinson's dancers as valid forms of knowing, it is also an approach that may, in itself, be viewed as a revitalising practice.

To return to Houston (2019), a principal errand of hers is to trouble general ideas of personal agency and bodily autonomy which she highlights as a particular challenge "for those faced with long-term degenerative illness or loss, particularly because these strike as people age" (151). Consequently, she argues for a form of *interdependent agency* (ibid.: 160) by "relat[ing] agency to how a person (perhaps frail, or getting frailer) chooses to live a life with dance as a key emotional and imaginative component" claiming "that relationships and the environment play key parts in how people cultivate agency through dance" (ibid.: 151). Also referencing Frank's idea about "the wounded storyteller" (2013) – a figure who through the experience of chronic illness cultivates a responsive compassion towards the bodily fragility and pain of others – Houston suggests viewing Parkinson's dancers through their engagement in dance as a relational, empathetic communicative practice in which "shared corporeality" and social connectedness extend the boundaries of individual agency (2019: 160).

Conceptualisations of interdependent agency have also been developed in different areas of critical disability scholarship. This is the case especially in connection to aspects of entering into professional and personal, as well as technologised, relations of support and care in order to ensure the individual agency and self-governmentality of people living with disabling conditions, e.g., with respect to receiving sexual support (e.g., Christensen-Strynø, 2018; Liddiard, 2014, 2018), or being reliant on assistive personnel and accessible technologies (e.g., Goggin & Newell, 2006; Goldfarb & Armenta, 2017). One reflection that is emphasised in these studies is that individual agency is contingent upon relational dependency, thus displaying a consistent demand for much more flexible understandings of the interdependent nature of normative conceptualisations of agency, autonomy and independence, for instance, through a broader focus on community involvement.

Specifically, in relation to dance and disability, the cultural movements of inclusive, adapted and integrated forms of dance have shown that bodily difference may be embraced through cultivating ideas of interdependence as a strength rather than as a sign of bodily inadequacy (Burridge & Nielsen, 2018; Gao, 2017; Kuppers, 2014). While Parkinson's dancers may cultivate interdependent agency when dancing, co-researchers in a dialogic research process may do the same when telling and interpreting each other's stories. By framing our analysis in terms of the dialogic interpretive approach, we seek to accentuate the interpersonal properties of dialogue, and to recognise and further substantiate the idea about experiential and embodied knowing in ways that pay special attention to the dynamic revitalising and agentive characteristics of the Parkinson's dancers' stories about dancing in which themes of ageing, chronic conditions and sensuality are entangled.

Cultivating sensualities through Parkinson's dancers' stories

The ethnographic study on which our analysis is based was carried out in early 2019 during the first six months of a three-year project. During the course of the six months we, a university research team from Roskilde University, visited and actively participated in five weekly, or bi-weekly, dance classes in the greater capital region in Denmark and carried out qualitative interviews with 43 Parkinson's dancers and seven dance teachers. The ethnographic study was designed to answer the first of two research questions: *What do people with Parkinson's disease and their spouses experience as the role of Parkinson's dance in their everyday lives by virtue of specific embodied, sensory and aesthetic experiences?*[4] The interview transcripts were, then, used for co-analysis in a series of storytelling workshops with the interviewed Parkinson's dancers who were invited to participate as co-researchers. The purpose of the storytelling workshops was to co-create knowledge about Parkinson's dance to be converted into a graphic novel (see Frølunde et al., 2021). This article draws on the transcribed interviews with the Parkinson's dancers but is also informed by the process of co-analysis through storytelling. The specific selection of excerpts was made on the basis of a thematic pre-analysis by identifying narratives of sensual pleasure.

Early indicators of tacit, yet still very present, codes of sensuality in the Parkinson's dance classes were related to the structuring of the dance activities through music. While the represented musical genres and styles differed from dance class to dance class, music – together with the verbal and physical instructions from the dance teachers – was a taken for granted incentive for the participants' engagement in various dance routines and sequences. There were many obvious links between certain musical styles – and even straightforward lyrical references in specific songs – that could be associated directly with sensual pleasure. Thus, music as an omnipresent modality of sound in the dance spaces was something that became a primary theme in the interviewed Parkinson's dancers' stories about the significance of dance as an enjoyable activity in itself and, more generally, as an integrated part of everyday lives.

Another central theme related to the sensual pleasure of dancing, brought to life in the self-narrations and stories of the Parkinson's dancers, was *dancing as a catalyst for various aesthetic associations*.

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[4] For more elaborate information about our collaborative research design and research question 2 (see: Phillips et al., 2021).

Several of these accounts were highly imaginative in which a current bodily sense of self was aligned either directly with memories of earlier times and experiences of a younger body, and sometimes also with other people, or with more abstract conceptions and scripts of vitality and youth(fulness).

It is through these two themes – *bodily pleasure and joy of life through music* and *sensual continuity, scripts of youth(fulness) and aestheticised celebrations of the body in the nexus between ageing and chronic conditions* – that we analyse questions about how Parkinson's dancers' experiences of dancing are informed by cultural narratives of vitality and sensuality and how they come to matter in the nexus between ageing and chronic conditions.

Stories of bodily pleasure and joy of life through music

The significance of music was indeed a central topic in the Parkinson's dancers' stories through which it became obvious that a great part of finding satisfaction in the activity of dancing had to do with the evocative qualities of moving the body to music. As one of the dance instructors, Henny, said: "*There are some who haven't danced at all for many years and then, suddenly, when the music is turned on, they go 'oh, that tune!' … Then they recall it and start swinging around*".

One immediate interpretation of Henny's account is to turn to the functional remedial properties of music, which in relation to Parkinson's research have been connected to the 'overcoming' of physical challenges, such as muscular rigidity and 'freezing of gait', by focusing on the pulse and metronomic characteristics of music as an effective external cue that can be helpful in initiating bodily movement (Houston, 2019: 67). However, what Henny actually seems to be emphasising is music as a significant component in ways that have more to do with the potential atmospheric and mood-providing moments of dancing to music (ibid.: 68), which was also confirmed through, and further explored in, some of the Parkinson's dancers' own stories about the importance of music. Although, correlations between music and corrective therapeutic effects on the body were frequently mentioned, many of the Parkinson's dancers also described how music and dancing could offer something more than the alleviation of physical discomfort or pain:

> I was immediately caught by it as soon as I heard the tunes. They really inspire you to get started, don't they? So I love it! And then you're in a good mood, and I think it gives me more than what I get from actual workouts, I think I get more power from dancing, and now I have lost six kilos! Without paying attention to it, I've lost my 'handles' [laughter]. (Margit, age 80).

Here Margit zealously describes her discovery of the Parkinson's dance class she attends, and how she experiences the music as the main invigorating impetus for her bodily engagement in dance. Moreover, by associating the 'good mood' that music helps to produce with the experience of feeling more 'powerful' from dancing than from other forms of physical exercising, she explicitly distances herself from being motivated by dominant discourses of rationalising engagement in dance activities in terms of physical health-related gains. However, by pointing out that dancing actually has made her lose weight (although this may be on a humorous side note), she also confirms the presence of conventional healthist beliefs by drawing on the common cultural trope of weight loss as an unquestionable carrier of positive value (Bacon, 2010; Christensen-Strynø & Eriksen, 2020).

Some of the Parkinson's dancers' stories contained biomedical arguments in favour of music and dance which revolved around their direct positive physical effects in overcoming physical challenges and alleviating bodily symptoms of Parkinson's. For example, this is very clear in relation to a prevailing biomedicalised understanding, which is manifested through a common point of reference to the deficiency of dopamine as a typical diagnostic feature of bodily decline when living with Parkinson's and other neurodegenerative illnesses, as well as being part of an ageing group of people (Lauring et al., 2019). At the same time, many of the dancers' stories draw on holistic and embodied ways of knowing that do not rationalise or instrumentalise music and dance as a means of achieving positive physical effects on the body but, instead, refer to joy, sensual pleasure, intensity and the warm sociality that emanates from the communal nature of dance (Olsson & Heikkinen, 2019).

In the following story told by Katherine, it is interesting that her point of departure is to establish an explanatory link between dopamine deficit/restitution and her vigorous embodied experience of being affected by the music at a rock concert:

> We're all talking about that pleasure hormone, dopamine, we're missing, and when we move our bodies, dopamine gets released in our brains, right? And in terms of music, I thought about it because once I went to one of those Friday night rock concerts in Tivoli with Sort Sol [Danish rock band]. And then it was like – and I've never experienced this before – like the music went straight into my body. It was an absolutely amazing experience. And it was like I kind of listened with my whole body. And I hadn't really been crazy about the band before, but the music went straight to my body, and I was completely stunned that it could do that, and I thought: 'shut up, can it possibly have that effect?' It was a powerful experience, I'd say. And it was the music, and also the overall experience – great music and the holistic experience of having all your senses affected, right? I was high from it for several days. It just went 'pling!', and the dopamine went straight up to my brain and spread to my body, and then I just felt so damn good. And that exact feeling of happiness is worth pursuing again, right? (Katherine, age 63).

Although Katherine explicitly frames her story through a rhetorical orientation towards a biomedically informed reasoning, it is also noticeable that she so vividly describes her experience of the concert as a transformative sensual moment in which she got in touch with her own body in new meaningful ways that convincingly conveys a belief in the holistically embodied potential of music as an access point to achieving bodily pleasure. More than understanding her story as a promotion of medicalised forms of knowledge, Katherine's framing of her experience can be viewed as a narratologically skilled manoeuvre, in which she utilises her knowledge of dopamine deficit and restitution as a narrative plot device that helps substantiate her claims about the value of music in its own right. As Frank asserts, "stories depend on other stories: on recognizable plots, character types, conventional tropes, genre-specific cues that build suspense (…) experience follows from the availability of narrative resources, and people's immense creativity in using these resources to fabricate their own stories" (2010: 119). By leaning on to the established narrative plot of procuring a restitution of dopamine, Katherine makes her experience broadly recognisable and justifiable to people with more conventional and compartmentalised understandings of living with a chronic condition as a state of always being on a quest for a cure (e.g., Clare, 2017; Kafer, 2013).

Like Katherine, other Parkinson's dancers also expanded on their personal relationship to music as a stimulating component of dancing, often through anecdotal memories of specific situations in which music was a significant trigger of joy:

> It's a bit difficult to describe, I think. I can't really explain why it is that you think music and dance means something. But they do! So, for instance, when we're driving in the car, and there's a nice little tune on the radio, I turn up the volume completely. I enjoy doing that when I'm all by myself, because otherwise it can be annoying for those who are with me [laughter]. It can get a bit noisy and loud. But when you're done, you feel really good from the tune. You don't feel like you have Parkinson's. It's just really good music that affects something in your head. Especially loud rock music – that's

> something I really appreciate – listening to loud music occasionally. Music means something. And rock music means a little bit more. It goes straight to my head and does something which I don't know what is (Bjarke, age 72).

Bjarke's story contrasts Katherine's in that he does not seek to rationalise his experience of being affected by music, in fact, he underscores the 'unexplainable' element of being completely immersed in his personal space when listening to loud rock music in the car, almost as an added value. Especially, his story seems to draw parallels to well-known popular cultural imaginations of *being on the road* as an exemplary symbol of 'freedom', for example, as known from iconic Hollywood road-trip movies such as *Easy Rider* (1969) and *Thelma & Louise* (1991), or the 1950's North American Beat Culture literature such as Jack Kerouac's *On the Road* (1957). Furthermore, Bjarke's emphasis on "loud rock music" also points to the specific auditive qualities of music as a form of mediated formalised sound crafted to generate immediate sensational gratification (e.g., Austern, 2002). Interdisciplinary studies in musicology suggest that music – in its capacity of being sound in motion – is, in fact, a form of *transmissible vitality* (Stern, 2010). Thus, when Bjarke stresses that turning up the volume has a significant positive effect on his mood, he describes a bodily intensity of feeling 'more alive' in ways that contrast his feelings associated with having Parkinson's. While Bjarke's story draws on other narrative resources than Katherine's, their messages of highlighting music as a central stimulus in its own right are very similar.

With regards to the direct correlation between vivacious understandings of music and dancing, most of the Parkinson's dancers also made the point that they considered dance and music as inseparable, through which it also became clear that the enjoyment of dancing for many were associated with states of ease and carelessness, as well as with humour and having a good time with other people:

> Well, I'm a terrible amateur dancer, which can be a big embarrassment to my kids when their dad throws himself into dance. I love when there's music and to dance and move to the rhythms. I like it a lot and I'm an uninhibited dancer sometimes [laughs]. But the fact that it sometimes looks quite funny can also bring laughter. Once, we were on a bike tour in Croatia and cruised on a boat between the islands. We were dropped off at the shores and biked to the opposite side of the islands and were picked up again. And there were parties in the evenings with some very funny, different people, Belgians and the like. I danced some evenings there [laughs], and I cleared the dance floor! The others just stood there and laughed at me, they just thought it was so funny, and then I felt even more stimulated. Swung around poles, and had a lot of fun – and so did the others (Eskild, age 73).

In this story, Eskild utilises a range of narrative resources in order to convey his effervescent enjoyment of dance. By drawing on classic cultural tropes of travelling as a stimulating adventurous meeting with foreign cultures, he constructs a narrative framing in which music and dancing is integrated into an easy-going and fun social setting. In addition, he inserts himself as a 'class clown' character type who, in a self-deprecating style, generates comic relief through his portrayal of himself as the funny dancing subject and centre of the party. Much like Bjarke's, Eskild's story highlights the pure and vibrant joys of life without seeking justification in rational explanations of why music and dance give rise to bodily pleasure. Moreover, Eskild's story connects the vivifying influence of music and dance to the importance of the social dimension of engaging in dance as a communal event (Houston, 2019: 35–39) which, in this particular case, comprises a form of humorous entertainment.

As this analytical section has outlined, the different stories of the Parkinson's dancers show a strong connection between music and dance, and demonstrate how music is perceived as a source of different forms of sensual pleasure. The different stories also provide insight into a variation of narrative strategies that rely on a wide range of cultural references and values which shows how the Parkinson's dancers' stories encompass animating and creative expressions. In the second part of our analysis, we delve further into the aesthetic and cultural imaginative properties of dance as a sensual activity in the nexus between ageing and chronic conditions.

Stories of sensual continuity, scripts of youth(fulness) and aestheticised celebrations of the body in the nexus between ageing and chronic conditions

As noted earlier, Milton's (2017) conceptualisation of safe sensuality is helpful in gaining a deeper understanding of the ways in which social dance classes for older people create access to bodily pleasure through offering well-defined spaces for engaging in sensual interactions. This was also clearly reflected in some of the Parkinson's dancers' stories in which it became increasingly evident that different forms of what can be referred to as *sensual continuity* were in play through distinctive orientations towards dancing as an activity with close ties to earlier times and memories of life before Parkinson's.

In the following dialogue, Nina and Henrik, a couple who attend a weekly Parkinson's dance class together, talk about their views on the significance of dancing, both depicting their lifelong companionship with each other and with dance and music.

> Nina: Dancing can be something you do together and a form of communication. A very intense communication, also a flirtatious communication. And it all depends on whom you dance with and how you dance. I still flirt with Henrik when we dance, and I don't do that with others, after all [laughter].
>
> Henrik: You could say that dancing is special, because you can do it alone, you can do it in pairs, you can do it in groups, you can do it by applying rules, but you can also do it 'freestyle'. And then there are all the genres as well. There are many ways to do it, aren't there?
>
> Nina: And it can express an incredible number of different things … I dragged Henrik to salsa! We've always danced together. We've always pulled each other onto the dance floor. There's no doubt that if we invite each other onto the dance floor at a party, it's to give each other a loving hug.
>
> Henrik: If it's a tune you know you're 'a happy cookie', and then you're also motivated to get started. The joy of recognition, you could say.
>
> Nina: But it's also because of having experience with a particular song. I think you can actually divide your life by music. We have so many memories throughout life associated with different music, right? When you hear a song, you are fixed in that time, and have different memories – good and bad – in relation to it. So, I enjoy those emotional shifts; that you can have both the soft and feminine and the powerful and masculine. Just as I enjoyed trying the flamenco in which you play yourself into a role, assuming a kind of gentle feeling or a powerful feeling. (Nina, age 58 and Henrik, age 64).

First of all, Nina's and Henrik's shared story says a lot about their appreciation of dance and music as a way of continuously cultivating their romantic relationship as life partners. Moreover, Henrik's description of the ways in which dancing accommodates different forms of social relationships and interactions by following prescribed directions, as well as Nina's account of 'role playing' by engaging with gendered and emotional typecasts, resonate well with Milton's (2017) understanding of "safe sensuality". Secondly, what is also noticeable is their associations to memories of dancing from earlier in their lives (also with music as the obvious trigger), which Nina describes as being emotionally connected to. It is almost as if dance and music create a direct gateway to the past in which specific bodily sensations are revived in the present. Also, Nina's initial remark about how she *still* flirts with Henrik when they dance together hints at a desire to sustain a shared sensual practice between the two of them that is made available through their memories of dancing as a form of *sensual continuity*.

There were also other Parkinson dancers who told stories in which the memories of dancing seemed to connect them to emotional and embodied states of pleasurable fulfilment, and in which their stories also became imaginative and explicitly evocative. Here is an example taken from a story told by Minna:

> You can just imagine yourself dancing with big dresses and stuff like that, right? Well, I think that's lovely! When I dance the English waltz, I feel like I'm wearing a big dress. Because, I remember when I went to school, we used to dance at parties, and once I danced the English waltz with someone who did it so well. And I tell you, we were almost alone on the dance floor, and we took up the entire dance space. So, when I dance the English waltz, I'm reminded of that: a big dress and of dressing up beautifully. (Minna, age 74).

Minna's depiction of how dancing can evoke a bodily state of wearing dreamy voluminous dresses is followed up by the specific memory of dancing at a school party where she and her dance partner are portrayed as if in a Cinderella-like fantasy. This suggests a nostalgic and romantic longing for the past. Her aesthetically stylised characterisation of how her younger self and her talented partner fill out the dance space offers a visceral embodied account of being young and carefree, which stands in unmentioned contrast to her present situation of dealing with an allegedly frailer body marked by ageing and Parkinson's. By correlating her current experiences of dancing with her younger self-image as a dancer, Minna creates narrative continuity between her past and present. Thus, by aligning her older body with her younger one, she seems to extend a blissful script of youth onto her current bodily condition. Thus, Minna's story highlights how sensual continuity can be instrumentalised as a narrative strategy through an aestheticised positioning of youth based on personal memories.

There were also some dancers who associated dancing with youthfulness in other ways, such as Signe who refers to the dance teachers in her Parkinson's dance class as the epitomes of youthful values and expressions:

> At first, I thought dance class was a little too slow but, on the other hand, for some who are a little more bothered with Parkinson's than me, it may have been fine. And I wouldn't have opted out of Tivoli because I had a feeling that it would evolve along the way – and it has. It's just so much fun now! And the dance teachers, those young girls, are so positive and talented. They praise and praise us. It has also become more fun because I think that the young dance teachers also want a bit more action. They just went slow in the beginning to make sure everyone could join in, I think. And you have to imitate the teachers, and I think it's getting better and better. You become sensitive to how body awareness is also incredibly important. But you could say that I'm lucky because I've always done competitive sports and have always been pretty all-around with dancing, tennis, table tennis, swimming and skiing – and gymnastics. In that sense, it has not been terrible for me, while I think that for others – if they have not exercised very much – then it's also hard work. I was at the doctor's yesterday, and he asked: 'how much exercise is it that you actually do?' And then I told him, and he said: 'that's why you're so healthy' [laughter]. It's so nice he said that I'm healthy. And, of course, I'm not, but on the other hand, I can do as much as many others at my age. (Signe, age 70).

By referring to the dance teachers as "those young girls" and relating them to values of positivity and talent, Signe closely aligns herself with their ideals by specifically locating her own sense of fun with the teachers' increased initiatives to encourage "more action". The Parkinson's dance teachers in Tivoli Ballet School are all professionally trained ballet dancers and thus represent body images of physical discipline and strength, as well as particular aesthetic idioms of bodily refinement in the artistic practice of dance. Signe's alignment with the teachers' ideals is further consolidated by emphasising how imitating the teachers has heightened her bodily awareness. In addition, she manages to position her own youthful – and healthy – lifestyle, both through distancing herself from fellow Parkinson's dance classmates by pointing out that some may be more inhibited than her, and through suggesting that on a functional level her physical health is equivalent to people in her own age group who do not have Parkinson's. Signe's repeated reference to "the young dance teachers" could be read along the lines of internalised ageist scripts of youthfulness (e.g., Rozanova, 2009) in which a fetishisation of youthful bodies and attitudes, like the dance teachers', signifies the values of a culture frantic for eternal youth. However, in her story it is also evident that she considers the dance teachers as important allies who attentively adjust and customise the dance activities in order to meet the Parkinson's dancers' different bodily abilities and needs. In this sense, Signe also exposes the conceivably interdependent values of leaning on scripts of energetic youthfulness. In contrast to Minna's scenic account of reliving her own youth, Signe's story points to a less romanticised and more pragmatic explanation of how she gains bodily pleasure through dance. Interestingly, both of their stories privilege youthful values and ways of expressing their experience. In so doing, they build on a predominant set of expectations for living up to traditional scripts of health and youth, which dancing – in different ways – helps them to realise.

The Parkinson's dancers' stories in this section highlight how distinctive ways of creating sensual continuity through dance are at play as a strategy for negotiating ideas of bodily pleasure in the nexus between ageing and chronic conditions. While conventional notions of youthfulness appear as a structuring narrative trope – also marking an affinity with dominant discourses of successful ageing (Bülow & Söderqvist, 2014; Rozanova, 2009) – the imaginative and aesthetically stylised elements in their stories also shine through. This hints at the dancers' experiences of dancing as a form of creative release. In this last story told by Regitze, who attends a weekly Parkinson's dance class at Tivoli Ballet School, this idea is brought to the fore as she combines her reflections on dancing with ideas about visual art and cultural and aesthetic inspirations in a visionary fashion. This encompasses a potentially revitalising repositioning of dancing as a celebratory attitude towards life in the nexus between ageing and chronic conditions:

> I think the things we do [in dance class] are adventurous. And in a good way where you let go and there's no direction, but you can use your imagination. And then you just get excited by the music. You can feel it in your heart and brain, and you're moved by it. You feel so privileged … It's a whole new world to me, both to make those movements and, then, in that way, to be present in something like that. There are so many things going on in your head when you hear the music. It's big and it's infinite, isn't it? … And also, when they draw inspiration from the characters Pierrot and Columbine; it's also a lot of fun, and so much of it you recognise from real life, I think. You go on a little journey. So, I think it's connected somehow … Look at my wall over there, I have a [picture of] Harlequin, and in all sorts of colours. I made that many years ago. But sometimes I can see a common thread in all of it. At least, in my behaviour, I have some patterns I can see unconsciously repeated, because I didn't think of the connection between Harlequin and Tivoli [back then], I just thought it was so nice, and that there were many colours … It's like the kaleidoscope; to move the dance from one place to another. It provides some options. After all, beautiful patterns come out of it. And yes, you could say, it's good that you don't have to look at

> yourself in the mirror, but you get a good experience. You feel like you're part of creating something, I think (Regitze, age 70).

Regitze's story does not rely on traditional tropes of youth or on individualised scripts of successful ageing. Instead, she proposes more abstract ideas of dancing as an imaginative, sensory and creative outlet. She describes these through feelings of an almost universal connectedness, not only to her own body and mind but also to her past and present environments represented by art and culture. As she mentions, the teachers in her Parkinson's dance class often make references to the classic Harlequinade characters drawing on a long tradition of pantomime theatre in the Tivoli Gardens where the dance class is held on the premises of the ballet school. In her atmospheric descriptions of her appreciation of the colourful pantomime characters, she connects the characters to a self-made picture of Harlequin she made long ago, thereby forging a predetermined correlation between her past and present. She links this to the kaleidoscope as a metaphor for the ever-changing, yet colourful, space of opportunities in life. The poetic and aesthetic abstractions in Regitze's story set the tone for an idiosyncratic logic in which dance, music and visual art are all part of a greater picture of achieving meaning and pleasure. Through their correlation, she constructs a personalised poetics of joy in life in which she argues for the importance of locating "a common thread" between the things that bring joy to herself, and which help her to find meaning in the particular circumstances, even as they change throughout life. In addition, she subtly attributes value to her present position by pointing to her own increased capacity to detect her own patterns, indicating that time, ageing and Parkinson's have authorised her to understand better the value of being able to uncover and claim her own truths (Frank, 2010, 2013). In this sense, Regitze's story applies another set of well-known cultural tropes in which ageing and life experience are equated with wisdom. Yet, perhaps more importantly, she takes a stance in which meaning-making is a constantly emergent opportunity of learning in which the significance of dancing and the joy of life are inextricably linked to, and interweave with, inevitable positions of ageing and living with Parkinson's. In this way, her story can be understood as an aestheticised celebration of the body in the nexus between ageing and chronic conditions.

"To dance is to live": curative imaginaries of dancing as a gateway to revitalising sensualities of ageing

The famous quote "to travel is to live" is from the Danish poet Hans Christian Andersen's autobiographical travelogue *The Fairy Tale of my Life* (1855) and appears in a section in which he ponders over his life experiences of grand touring around Europe. Here he describes how he has grown to appreciate an inner calmness (of the soul) that has come along with age and maturity, and he clarifies that he finds this current state of mind to be more compatible with the multifariousness of travelling than the motivation of his younger self's escapist restlessness. The mellow peacefulness that Andersen describes is thus the ripe fruit of a life's experience of travelling in which the formative properties of growing older connote a form of intellectual authority, in fact, very similar to Regitze's story above. However, in contemporary popular cultural iterations of the expression, it has also become a clichéd catch phrase and consumer-oriented marker of travelling as a lifestyle routine, and has thus been transformed from a poetic to a practical (and politicised) statement. Whether in relation to people's expectations to spend their leisure and holiday time in a variety of destinations far away from their home or their access to professionalised career-related business travel, the phrase echoes the travel industry's commercialised claim to buoyancy and vitality. In doing so, the expression seems to have shifted meaning in the direction of: *the more you travel – the more you are alive*. Andersen's proclamation is thus a good example of the ambivalent and intersecting implications of ageing and vitality.

Aside from these reflections, the link between the Andersen citation and Parkinson's dance may seem quite arbitrary but is, in fact, inspired by a specific rephrasing of his words: "To dance is to live", which is used as the tagline for a Danish Parkinson's dance trip concept called Parkinson Ballroom Fitness™ Dance Week. This concept is a fairly new model for, and independent branch of, Parkinson's dance which has been developed and trademarked by the popular dance teacher and entertainer Elisabeth Dalsgaard as a part of her private business Swingtime. In particular, the concept is applied in dance courses set in the sunny climes of Southern Europe which are, in the style of package tourism, customised for people with Parkinson's and their relatives, and several of the Parkinson's dancers in our study have talked about their experiences with these trips. On Dalsgaard's website we are met by the "To dance is to live" tagline followed by the text: "Go on a dance trip with Swingtime and Elisabeth Dalsgaard. Dance creates atmosphere and joy of life, and when you combine it with new horizons the experience is absolutely amazing" (swingtime.dk/danserejser – *our translation*). Through a preview of a promotion video looping in the background of the text, we get drawn into the Swingtime universe by the dynamic visuals of happy people energetically dancing around in large groups enclosed by palm trees and with a setting sun as the picturesque backdrop. It is thus implied that Swingtime promotes the idea of dancing as a revitalising and invigorating practice which is elevated by performatively exotified and saleable fantasies of travelling.

Swingtime's business model comprises dance trips addressed to different communities, and further down on the website we find the description of the dance trips for people with Parkinson's:

> Joy, dance and community
> Join Swingtime for Parkinson Ballroom Fitness™ Dance Week with instructor Elisabeth Dalsgaard and her team of helpers. Your body will love you for it. Laugh, get sweaty on your forehead and experience lots of zest for life. Everyone can participate – beginners as well as experienced – men as well as women! The dance class is organised based on the needs and level of the individual participants, so that everyone gets something out of the class. We dance two modules daily and supplement with joint walks etc. The week is aimed at Parkinson's patients and their relatives. We'll dance, dance, dance – and laugh! We get a lot of fun exercise (swingtime.dk/danserejser – *our translation*).

What is noticeable here is not only the ways in which the text explicitly connects narratives of the sensuous dancing body with quality of life, it is also the culturally coded tensional relationship between, on the one hand, promoting dance as a form of freedom to transcend Parkinson's (Houston, 2019: 145) and, on the other hand, upholding a traditional asymmetrical client/patron relationship, which is reflected in retaining people with Parkinson's in a 'patient'-oriented rhetoric with Dalsgaard as the cheerful benefactor. This power dynamic taps into a conventional "curative imagination" (Kafer, 2013: 27) in which "there is always an expectation of intervention towards disability [and chronic conditions], if not by elimination then at least through 'normalising treatments that work to assimilate the disabled body/mind as much as possible'" (Sandberg & Marshall, 2017: 6). In this sense, Parkinson's dance is ambiguously presented as something that 'depatientifies' and is, at the same time, kept in a position of being a beneficial 'treatment'. This is not unproblematic, as the commanding mechanisms of biopowered self-discipline masquerading as liberation (Foucault, 1978, 1979) unquestionably lurk in the background. At the same time, it is also important to recognise that Parkinson's dance is not commonly acknowledged as a treatment, at least not in comparison to other curative interventions that in the Danish health care context are made eligible for subsidy, such as physiotherapy. Thus, when the Parkinson's dancers from our project tell their stories about dancing as a revitalising sensual practice, which have also included high praise to Dalsgaard's dance trip concept, they are – as our analysis has shown – not just conveying reductive understandings of sensuality in the nexus between ageing and chronic conditions, they are simultaneously showing their support to a less approved approach. Consequently, the curative imaginary of Parkinson's dance, in contrast to other forms of therapeutic and rehabilitative treatment of Parkinson's, challenges traditional notions of health by cultivating spaces of sensuality and interdependent agency in ways that are obviously experienced as empowering to the dancers themselves.

While the curative imaginary of Parkinson's dance may revitalise sensualities of ageing with Parkinson's in ways that heavily depend on predominant conceptions of health, ageing and stereotypical tropes of joy and vitality, it is also a practice of great importance to the people involved. Keeping our dialogic interpretive approach in mind, it is through the lived experiences of the Parkinson's dancers' stories that we are able to gain a deeper and more nuanced understanding of how dancing in the nexus between ageing and chronic conditions emerges as a revitalising sensual practice. Like Hans Christian Andersen's portrayal of travelling, dancing can be a poetic journey of changing life conditions in which both the maturity of getting older, as well as the difficult challenges that come with ageing and chronic conditions, become an occasion for new experiences and sensations which, for better and worse, add significance and meaning to the activities people choose (and feel obligated) to engage with.

Conclusion

This article has explored the meaning and importance of Parkinson's dance in relation to intersecting and overlapping identity categories of ageing and chronic conditions by focusing on the interplay between dominant cultural signifiers, curative imaginaries and the lived experiences of Parkinson's dancers' stories about dancing as a space of revitalised sensuality.

In our analysis, we applied Frank's dialogic interpretive approach in order to ascribe critical value to the Parkinson's dancers' stories about dancing as an embodied, pleasurable and sensual activity and to reframe notions of individual agency towards an understanding of the interdependent nature of storytelling and dancing as revitalising practices.

Our analysis displayed nuanced accounts of how Parkinson's dance, and telling stories about dance, affects the nexus between ageing and chronic conditions in the following ways: First, several of the stories emphasised music as a catalyst for bodily pleasure and joy of life. This claim was qualified in a variety of ways by utilising biomedical knowledge of dopamine restitution as a narrative plot device and by drawing on cultural references to music and dance in relation to experiences of freedom, travelling and humorous social interaction. Second, other stories underscored the experience of bodily pleasure by creating sensual continuity through their orientations towards earlier memories of life before Parkinson's, or by drawing on cultural scripts of youthfulness, but also through an orientation towards acts of dancing as an imaginative and aestheticised creative release and celebration of the body in the nexus between ageing and chronic conditions. Finally, the analysis gave rise to perspectives on the ways in which curative imaginaries of Parkinson's dance are enmeshed with Parkinson's dancers' experiences of dancing as an invigorating, sensual practice, both in terms of incorporation through conforming to dominant tropes of health and cure and of resistance to traditional health care in which Parkinson's dance has yet to become a widely recognised activity.

Declarations of Competing Interest

None.

Funding

This work was supported by the Humanities and Praxis Program, The Velux Foundations, Denmark (grant number 22810).

Acknowledgements

The authors would like to thank The Velux Foundations, Denmark, for funding the research on which this article is based. A special thank you to all the Parkinson's dancers and co-researchers for their contributions to the research project.

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