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Alzh & Imer



«With a glass spoon I dig into my story,
but I strike somewhat at random, my memory is gone.»

— *Wolftail*, Fabrizio De André

Warning

Alzh & Imer deals with themes anything but light. There is one rule that takes absolute precedence over all others. At any time you can say “*This story has been lost beyond repair*” and get up from the table. It's a sign that you don't wish to continue. Don't be afraid to use this phrase, but make sure you only use it when the game has become really emotionally unbearable for you.

1 Introduction

Alzh & Imer is a story game for two people. You are going to impersonate an elderly couple struggling with a chronic, degenerative and disabling disease.

One of the two, in fact, will be affected by Alzheimer's disease that will lead them first to forget the most recent events, then—with the relentless progress of the disease—to lose the use of speech and no longer be self-sufficient.

Alzheimer is a disease that can affect not only the *ill person* but also those around them: the *partner*, in fact, will take care of the *ill person* and engage in a daily and all-out struggle with the disease, guilty for making them *lose* their loved one forever.

Why this recipe?

The theme of *Game Chef 2018* is “Lost Stories”. One of the final questions in the presentation of this year’s theme and ingredients guided me in creating *Alzh & Imer*: “What would happen if we recovered a story we had thought was lost?”

Memory is a story, but it is also remembrance. Losing memories can mean a lot, especially for those who live with them, such as elderly people. I tried to imagine the experience of a person suffering from Alzheimer's disease. What could the sudden appearance of a memory mean? And what, instead, would it mean not to be able to remember anymore?

I've decided to use all four of this year's ingredients as well: “blunt”, “speedwalking”, “sheepskin” and “weigh”. These are the words that activate the rules of both players: “speedwalking” and “sheepskin” for the player who plays the *ill person*; “blunt” and “weigh” for the one who plays the *partner*.

Why a game about this topic?

I've been thinking about it for a long time, I have to admit.

Long before the announcement of the theme and ingredients of *Game Chef 2018*, I found myself thinking that I wanted to address the theme of Alzheimer's in a game. First of all, because I firmly believe in gaming as a tool to raise awareness; secondly because it is in illness and difficulty that love stories reveal themselves for what they are, that is to say a help stronger than any medicine. Not using this powerful narrative input would be a shame.

Finally, I felt I owed it to my grandfather, who was struck by a form of dementia that was never diagnosed as Alzheimer, even though he had rather similar symptoms. On certain days and at certain times, a lucid expression glimmered in his eyes; I always had the suspicion that he understood everything, even when "understanding" had become the most difficult activity for him.

If the theme of *Alzh & Imer* seems too "heavy" to you, forget about this game; choose something else and spend a nice evening. I don't blame you for that, quite the contrary.

What is needed?

- A black and white photograph representing the character who has not fallen ill; it will be held in the hands of the player who plays the *ill person*.
- A bag of small and two different coloured stones (about fifty, conventionally referred to as *white stones* and *black stones*); it is important that all the stones are different sizes and weights.
- An everyday object for every player; come to the gaming table carrying it with you in your pocket and don't show it until the rules invite you to do so.
- A scale (ideal would be a two-dish scale, but even an electronic scale is sufficient); if you do not have a scale, use the optional rule for the epilogue (p. 24).
- Index cards, pencils, and erasers; do not use pens, as you will need to delete some words later in the game.

2 The game

A game of *Alzh & Imer* lasts about 2–3 hours and is divided into thirteen scenes: a prologue in which you meet the two protagonists, six scenes (corresponding to the six stages of the disease) alternating with five memories in which you explore their relationship as the disease progresses, and finally an epilogue in which you let go of Alzh and Imer and no longer deal with their story. Before you start, place the open stone bag in the centre of the table. Sit in a comfortable position, avoiding being too far from each other.

The two protagonists

To start playing, choose who plays Alzh and who plays Imer.¹ Now look at the black and white picture together and decide whether it represents more Alzh or Imer, depending on the idea you have of the two characters. Once you have decided, the player who plays the character represented in the picture gives the photograph to the other player.

¹ The gender of the protagonists is irrelevant. The choice between playing an heterosexual couple and an homosexual one is yours. It's no accident that I decided to “create” two neutral names like Alzh and Imer.

The one who holds the photo in their hand plays the *ill person*; the other plays the *partner* who will take care of them.

The memories

Take two index cards each and write on each one a prompt for a memory: it can be a word, a verb, a very short sentence, a colour, etc. After writing two memories each, put the index cards face down and mix them, then place them in the centre of the table next to the bag with the stones.

The rules

Below are the rules to be used at different times during the game. Remember that the rule described in the “Warning” section (p. 2) is always valid during the game. The other rules (those of the *ill person* and those of the *partner*) can be used either in the illness scenes or in the memory scenes. The prologue and the epilogue lie outside this discussion because in the first case there are no rules to use and in the second case there are completely different rules illustrated in the section “The epilogue”, on page 23. In addition, the illness scenes (except for the first stage) and the memory

scenes present some indications on how they should be set ("The scenes", p. 12).

The ill person

In the disease scenes:

- *When you follow the inexorable speedwalk of your destiny, take a black stone from the bag in the centre of the table and place it in front of you. You follow the inexorable speedwalk of your destiny when: you forget something; you show difficulties in completing a daily activity; you lose track of time; you have vision problems; you show difficulties in finding the right word; you move an object to an unusual place; you show poor judgment. Don't limit yourself to these indications: whenever you think you're bringing the disease into play with words or actions, you take a black stone. You are the last judge of your actions and words. Your *partner* cannot tell you when to take or not to take a black stone.*
- *When you wrap yourself into the sheepskin of your memories, take a white stone from the bag in the centre of the table and place it in front of you. You wrap yourself into the sheepskin of your memories when: you*

suddenly remember something; you finally find a word you've been looking for for a while; you rely on your *partner* because you recognise them. Don't limit yourself to these indications: whenever you think you can show a moment of lucidity with words or actions, you take a white stone. You are the last judge of your actions and words. The *partner* cannot tell you when to take or not to take a white stone.

At the end of a memory scene:

- Tear the photograph in two; keep the smaller fragment and hand over the larger one to your *partner*.
- *When you have a fragment that is too small to tear further, stop recognizing your partner.* You are no longer able to do this; you will probably remember some events but you will not be able to associate them with the person in front of you.

The partner

In the disease scenes:

- *When you let the ill person feel the weight of their condition, you take a black stone from the bag in the centre of the table and place it in front*

of you. You let the ill person feel the weight of their condition when: you lose your patience at the umpteenth absurd request; you get angry because you can't stand that they are no longer able to do something they could do autonomously just a few weeks ago; you get exasperated and desperate because it almost looks like their being so clueless and candid is deliberate. Don't limit yourself to these indications: whenever you think you are bringing your exasperation at the disease into play with words or actions, you take a black stone. You are the last judge of your actions and words. The *ill person* cannot tell you when to take or not to take a black stone.

- *When you blunt your positions and accommodate the ill person*, take a white stone from the bag in the centre of the table and place it in front of you. You blunt your positions and accommodate the *ill person* when: you show understanding for their condition; you are kind and helpful; you repeat for the umpteenth time an operation that you have been asked to do without complaining about it. Don't limit yourself to these indications: whenever you think you can show

understanding and patience with words or actions, take a white stone. You are the last judge of your actions and words. The *ill person* cannot tell you when to take or not to take a white stone.

- Once per scene (only during the disease scenes) you have the possibility to bring a memory into play, showing the *ill person* one of the index cards in front of you. If the *ill person* shows that they are recalling the event, put the index card back in front of you and both of you take two white stones; if the *ill person* shows that they are not recalling anything, erase with the rubber what is written on the index card, put it back in front of you and both of you take two black stones.

At the end of a memory scene, after receiving the fragment of the photograph from the hands of the *ill person*:

- Condense your reaction into a sentence of discouragement or hope about the fate of the *ill person*, something that you murmur to yourself in a moment of loneliness.

3 The scenes

Except for prologue and epilogue, there are two types of scenes in *Alzh & Imer*: disease scenes and memory scenes. The disease scenes are used to narrate the progress of the disease, while the memory scenes are flashbacks related to the memories of the *ill person* (and sometimes of the couple).

In the disease scenes (except for the one related to the first stage of the illness) players play to answer the questions listed under the relevant section, on the basis of the stones in front of you (one question per player).

Sometimes the questions assume that something has happened before or something may happen during the scene. Feel free to discuss and find a way to accommodate both questions, or play to actively support the other player in answering their question.

In the disease scenes you have to use the rules for the *ill person* and for the *partner*, and the *partner* has the possibility to play a memory card. The instructions on how to play the characters in the “The Prologue” section (p. 6) also apply to all disease scenes. Bring the disease scenes to a close as

soon as you realize that you have answered the questions.

The memory scenes (five in total) should be played in order to portray the memory, following the instructions in the relevant section. In the memory scenes you must use the photograph rule.

The prologue

Meet Alzh and Imer

Play a short scene that illustrates the life of the couple before the illness. Decide where and when the scene takes place, then play it as your character. Make sure you handle it as if it is a real conversation; keep action descriptions to a minimum (if necessary, mimic actions instead of describing them), give voice to your character, try to assign them a personality that you can convey through the tone of your voice or your facial expressions. Give Alzh and Imer a body.

The prologue's function is to meet the two protagonists, their professions, their desires, and their needs. If you think it makes sense, give the two protagonists a part of your life experience: your profession, your desires, or your needs. Just pay attention to the fact that, in doing so, putting yourself in the shoes of the character could be easier

and consequently much more intense. If you feel ready, be Alzh and Imer in every way.

First stage

Recurring amnesias

The first stage of the disease is characterised by sporadic memory loss. The symptoms do not yet affect professional life and social relations. The *ill person* tends to minimize, and for those around them it is not a wake-up call.

Play a scene that answers the questions: “How does the disease begin? What is the first thing that the *ill person* forgets?” Close the scene as soon as you realize that you have answered the question.

First memory

A childhood memory

The *ill person* draws the first card from the memory deck and reveals it to their *partner*, reading the content out loud. The *partner* asks the *ill person* to show the object in their pocket. This object is linked to a childhood memory of the *ill person*, together with the prompt on the card. The *ill person* tells the memory: everything must be clear, precise, almost maniacal in the descriptions. The *ill person*

remembers everything as if it was yesterday. The *partner* takes the card and keeps it in front of them, face up.

Second stage

The beginning of confusional phase

The second stage of the disease is characterized by frequent memory defects, confusion and slowness, personality changes, attempts to hide symptoms, anxious or depressive states, and bizarre behaviour. Play a scene that answers the questions listed below (one per player), based on the stones in front of you. Close the scene as soon as you realise that you have answered the two questions.

The ill person

- *Majority of white stones:* "How is your personality changing?"
- *Parity:* "What bizarre behaviour have you been showing lately?"
- *Majority of black stones:* "How does your anxiety or depression begin?"

The partner

- *Majority of white stones:* “What measures do you use to help the *ill person*?”
- *Parity:* “How do you broach the topic of the illness with the *ill person*?”
- *Majority of black stones:* “How do you suggest the *ill person* contact a doctor?”

Second memory

An adolescent memory

The *ill person* draws a card from the memory deck and reveals it to their *partner*, reading the content out loud. The *partner*, on the basis of the prompt indicated on the card, asks the *ill person*: “Once you told me that... Do you remember?” The *ill person* recounts the memory. They remember everything quite well; they probably confuse the year or insert people who were not present in the memory. The *partner* takes the card and keeps it in front of them, face up.

Third stage

The progression of confusional phase

The third stage of the disease is characterized by the inability to make decisions, episodes of disorientation in space and time, insistent denial of difficulties.

Play a scene that answers the questions listed below (one per player), based on the stones in front of you. Close the scene as soon as you realize that you have answered the two questions.

The ill person

- *Majority of white stones:* "You have lost something of value. How do you deal with this loss?"
- *Parity:* "What happens after you're lost and found?"
- *Majority of black stones:* "How do you react to the confirmed diagnosis of Alzheimer's?"

The partner

- *Majority of white stones:* "What do you do to prevent the *ill person* from losing their way home?"

- *Parity*: “How do you broach the topic of the illness with the *ill person*?”
- *Majority of black stones*: “How do you react to the denial of difficulties by the *ill person*?”

Third memory

An old memory

The *partner* draws a card from the memory deck and reveals it to the *ill person*, reading the content out loud. The *ill person*, on the basis of the prompt indicated on the card, asks their *partner*: “Have I already told you about that time that...?” The *partner* recounts the memory, interrupting themselves occasionally and letting the *ill person* continue. The *ill person* tries to remember but the tale must be confused: it is clear that they remember something, but not so clearly. The *partner* takes the card and keeps it in front of them, face up.

Fourth stage

The initial phase of dementia

The fourth stage of the disease is characterized by noticeable emotional reactions, loss of memory and thought, reduced ability to make simple decisions, increased social withdrawal.

Play a scene that answers the questions listed below (one per player), based on the stones in front of you. Close the scene as soon as you realize that you have answered the two questions.

The ill person

- *Majority of white stones:* “Your partner takes care of you. How do you react to the fact that they seem to control you anytime, anywhere?”
- *Parity:* “Something triggers a noticeable emotional reaction. What is this about?”
- *Majority of black stones:* “How do you react to not being able to make a decision?”

The partner

- *Majority of white stones:* “What do you do to prevent the *ill person* from isolating themselves and not wanting to meet anyone?”
- *Parity:* “How do you broach the topic of the illness with the *ill person*?”
- *Majority of black stones:* “How do you react when the *ill person* bursts into tears at the drop of a hat?”

Fourth memory

A fading memory

The *partner* draws a card from the memory deck and reveals it to the *ill person*, reading the content out loud. The *ill person* asks the *partner* to show the object in their pocket. This object, together with the prompt on the card, is linked to a memory they both share. The *partner* tells the memory, to try to bring it back to the *ill person*: everything must be clear, precise, almost obsessive in the descriptions. The *ill person* remembers very little, probably some fragments. The *partner* takes the card and keeps it in front of them, face up.

Fifth stage

The intermediate phase of dementia

The fifth stage of the disease is characterized by sleep and movement disorders, hallucinations, reveries, repetitive and purposeless behaviour, violent reactions.

Play a scene that answers the questions listed below (one per player), based on the stones in front of you. Close the scene as soon as you realize that you have answered the two questions.

The ill person

- *Majority of white stones:* "You can't sleep well anymore. How do you ask your *partner* for help?"
- *Parity:* "Someone comes to visit you frequently but only you can see them. Who are they?"
- *Majority of black stones:* "Something triggers a very violent reaction from you. What is this about?"

The partner

- *Majority of white stones:* "Caring for the *ill person* requires more and more energy and money. How do you ask for help?"
- *Parity:* "How do you react to yet another *ill person's* reverie?"
- *Majority of black stones:* "The *ill person* has reacted aggressively. Now you fear for the safety of both. What precautions do you take?"

Fifth memory

A lost memory

The cards are finished. The *ill person* has to stare at the *partner* in silence for a few minutes. The *partner* must interrupt the silence occasionally by asking: “Do you really not remember anything?” The *partner* closes the scene as soon as they have the feeling that the moment could be ruined in some way due to a lack of identification with the situation.

Sixth stage

The final phase of dementia

The sixth stage of the disease is characterized by loss of verbal abilities, passivity, nutritional difficulties, lethargy, coma.

Play a scene that answers the questions listed below (one per player), based on the stones in front of you. Close the scene as soon as you realize that you have answered the two questions.

The ill person

- *Majority of white stones:* “You're in bed and your *partner* is reading you a book. You only

get a few sentences in a very rare flash of lucidity. What book is it?"

- *Parity*: "You can't talk anymore. How do you try to make yourself understood?"
- *Majority of black stones*: "Something forces you to bed and you can hardly get back up. What is this about?"

The partner

- *Majority of white stones*: "Now that the *ill person* is in bed, paradoxically it is easier to take care of them. What do you do to relieve their suffering?"
- *Parity*: "The continuous lethargy to which the *ill person* is subjected drives them even further away from you. What do you do to draw their attention?"
- *Majority of black stones*: "The *ill person* is here but it's as if they is not there. Do you ever think of an easy solution?"

The epilogue

Let Alzh and Imer go

The epilogue is a short closing scene. You do not have to follow any rules, except those described below to define the tone of the epilogue.

Discard the index cards whose contents have been deleted and place in the middle of the table only those that still have the prompt for the memory. Collect all the black stones and all the white stones in front of you, then form two piles, take the scale and weigh them:

- *If the scale hangs on the side of the black stones, narrate the epilogue freely, placing emphasis on the disease and on how it finally managed to destroy the relationship between the two; then tear up the remaining memories and let Alzh and Imer go.*
- *If the scale hangs on the side of the white stones, narrate the epilogue freely, stressing the shreds of lucidity of the *ill person* and the constant care of the *partner*; bring the remaining memories into play and finally let Alzh and Imer go.*
- *If the scale does not hang on either side, don't tell any epilogue and let the story stand still.*

Alternative rule for the epilogue

If you do not have a scale, count the black and white stones to determine the tone of your epilogue.

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This document was created with Google Docs. The character is Palatino. The frame is taken from *Persona* (Ingmar Bergman, 1966).