It's good to talk - but not on the job. The message most of us receive at work is to keep our heads down and stay busy. And while this might be a useful rule for many professions, new research argues that the care industry needs to rethink the rulebook.

Anecdotal evidence suggests that older people enjoy thinking and talking about their past. Researchers at the Growing Older Research Programme, a network of projects funded by the Economic and Social Research Council, decided to explore this. They carried out a study which investigated the benefits that conversation and reminiscence can have for older people in care, using structured activities and interviews to test their ideas.

Researchers led by Dr Kevin McKee at the University of Sheffield recruited 142 volunteers living in various local nursing homes and began by assessing their "quality of life" using indicators such as psychological morale and morbidity. They then held weekly workshops for a month, in which participants talked or wrote about their past in groups and individually. Props were used to inspire reminiscence, including old objects, photographs, poems and local history documents. Focus groups consisting of care staff, participants and relatives were interviewed about opportunities and barriers to reminiscence, and a control group (who were not involved in any activities) were also monitored. After a month of workshops, the researchers re-assessed their participants' "quality of life" indicators and returned a month later to assess them again.

Two key findings emerged from this project. The first was that regular periods spent talking or writing about the past improved the older people's psychological state significantly. The researchers attributed these psychological improvements to three different factors:

- Sharing memories is a good tool for encouraging and building friendships.
- Telling stories is a good way for older people to emphasise their identity and remember contributions they made to others' lives.
- Passing on war stories to grandchildren is an important and neglected way of preserving family folklore.

The second key finding was that care staff are, like the rest of us, discouraged from conversing or laughing with people in the workplace. Although care staff were not the focus of the research, the concerns that they expressed about the constrictions on their time and the nature of their work became important.

A general feeling still lingers that talking and listening are not recognised as "real work" in care organisations, but this research makes a strong argument for the benefits of what is often seen as just "chatting". This aspect of care is not one that is always given priority. One resident, asked how often she was engaged in conversation with staff, replied: "Well, normally when I have my bath, because they are so busy. They can't be talking to you all the time, can they?" Organisations must consider allocating time for this type of care, say the researchers.

The researchers found that they could divide the volunteers into two groups - those who spent time thinking about regrets and resolving issues, and those who looked back with pleasure and enjoyed happy memories. Although both groups enjoyed and benefited from the activities, it is clearly important to tailor any reminiscence activity to individual needs. "Activities should form part of an individualised programme of care," says McKee. "And promoting the use of 'just talking' as a legitimate form of social care may encourage carers to harness potential benefits of everyday interactions relating to both past and present."

The researchers are keen that their findings are widely distributed to the care community, and are in discussions with organisations such as Community Health Sheffield, about staff training and forums for care workers. They hope to begin focusing on the role of care staff in reminiscence activity, and evaluate packages for staff training that take account of their findings.

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References

1 A full report of the research, *Evaluating the Impact of Reminiscence on the Quality of Life of Older People*, from the ESRC on 01793 413122. Further information can be obtained from Marg Walker on 0114 222 6467 or see *www.esrc.ac.uk*

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