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ABSTRACT

In this proposed training model for caregivers working with the frail elderly, the focus is first on encouraging participants to construct and share fragments of their lived experiences with elderly people and their beliefs about the aging process. Next, participants are asked to bring back written observations of their own work styles and working conditions in skilled nursing facilities. The model is adapted from the life history approach, an important tool for social science research in both sociology and anthropology. This radically abridged version of the approach involves oral sharing, elaboration and recording of life history events in writing, analysis, and group discussion in each session. Much current writing on use of the life history approach in adult education and training is in French by French, Canadian, and Swiss adult educators. Focus of adult educators using this approach seems to be on the education and training of adult educators and trainers. Components of the training program include the following: a program goal, objectives, design, and brief outline for three sessions that cover a life history approach to understanding conceptions of aging, understanding working with the elderly, and developing a work style. (Contains 16 references.) (YLB)

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BEYOND AGEISM: THE LIFE HISTORY APPROACH EDUCATES AND EMPOWERS HEALTH CARE PROVIDERS TO IMPROVE THE QUALITY OF LIFE OF ELDERLY PATIENTS.

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WHY CHOOSE THE LIFE HISTORY APPROACH?

Our decision to explore the life history approach and to suggest its use in the development of a training model for caregivers working with the frail elderly stems from our backgrounds in women's consciousness raising, experiential learning in adult basic education and ESL, educational programs in various health care settings and in the use of educational biography in adult undergraduate programs as an orientation to and preparation for college study. From our readings on the life history approach in adult education (see attached bibliography), we have noticed that, although there is infinite diversity in how it is used, there are some common procedures: a) the focus on a global or thematic construction and reconstruction of one's life history involving participants individually and collectively as both narrators and researchers; b) introductory and exploratory steps built into programs to familiarize participants with each other and with the approach; c) a contractual phase where participants decide on what they will do, when and how; d) presentation of life histories first orally, then in writing, and lastly, an analysis of the written work by participants themselves; e) activities that are done both individually and in groups depending on the participants, the project and the educational/professional context.

For our proposed training model, we focus first on encouraging participants to construct and share fragments of their lived experiences with elderly people and their beliefs about the aging process. Secondly, we ask participants to bring back written observations of their own workstyles and working conditions in skilled nursing facilities. The life history approach is for us a tool that should enable participants in a program such as this to discover how their assumptions about aging are both personal and social, and how those same assumptions can effect their workstyles. Participation in this training process should empower caregivers to confront their preconceptions about aging as well as examine their workstyles and work conditions more critically. Instead of following the usual sequence for presenting life histories--oral presentations, written presentations, analysis--we have imagined a combination of all three for each of the proposed sessions of the model training. Our radically abridged version of the life history approach involves oral sharing, elaboration and recording of life history events in writing, analysis and group discussion in each session.

Clearly, the life history approach is a crucial aspect of this training model yet it remains essentially a point of departure given the time and economic constraints traditionally imposed on the training and development of paraprofessionals in the United States. We are also critically aware that, given the class and cultural composition of caregivers working in skilled nursing facilities for the elderly, our discussions will be cross cultural dialogues on aging and work. Participants who for class or cultural reasons might not be as comfortable speaking about

themselves as others will tend to be more at ease with a life history approach that focuses on critical events in their lives rather than on a sustained narrative of their lived experience. To our advantage, the cross cultural nature of these encounters will, on the one hand, allow non-native Americans to become more aware of urban American assumptions about aging and, on the other hand, allow American caregivers to appreciate the existence of other values on this subject and to apprehend the relativity of their own values. We believe that the model training we are suggesting will enable caregivers to become more critically reflective about themselves and their workstyles, more able to imagine and initiate transformations in their workplaces and that, consequently, the quality of life of elderly patients will greatly improve.

ANTECEDENTS: THE LIFE HISTORY APPROACH IN SOCIAL SCIENCE

The life history approach can be traced back to the Chicago School of sociology in the early 1900s. It was an important tool for social science research in both sociology and anthropology (life stories). Social scientists, increasingly concerned with the professionalization of their fields, displaced life history approaches and centered almost exclusively on experimental and quantitative research methodologies. In the 1950s two well-known works resurrected interest in the life history approach: Oscar Lewis' Children of Sanchez and C. W. Mills' The Sociological Imagination. The following quotes from C. W. Mills and French sociologist Daniel Bertaux will illustrate some basic principles of the life history approach which have been appropriated by adult educators using this approach.

" The sociological imagination enables its possessor to understand the larger historical scene in terms of its meaning for the inner life and the external career of a variety of individuals...The fruit of this imagination...is the idea that the individual can understand his own experience and gauge his own fate only by locating himself within his period, that he can know his own chances in life only by becoming aware of those of all individuals in his circumstances...The sociological imagination enables us to grasp history and biography and the relations between the two within society."

C. W. Mills The Sociological Imagination p5

"The life history is the story told by one person to another of his/her life experience in a face to face interaction."

"To collect life histories is undoubtedly not an innocent practice. To tell one's life story is to risk one's self-image, the image others have of oneself as well as our own self-image. It involves

taking the risk of uncovering memories that were hidden because they were painful, weaknesses preferably forgotten, inheritances intended to be kept secret. It is not a self-evident gesture."

"The life history was from the beginning the autobiographical story of the Other: Native American, Polish immigrant, the deviant. In contradistinction to the autobiography which is spontaneous, the life history is a request from an outsider; and this request is usually made of one who would never have the idea of writing an autobiography."

" Life is experience, the life history is the expression of this experience...Life histories reveal the social, in its multiple facets, not as disembodied reflections of abstract structures but as a collection of lived experiences."

Daniel Bertaux, "Les recits de vie comme forme d'expression, comme approche et comme mouvement" in G. Pineau and G. Jobert (eds.) Histoires de Vie pp. 26, 18, 33, 34. (my translation)

THE LIFE HISTORY APPROACH IN ADULT EDUCATION

In an article that connects and distinguishes the use of the life history approach in sociology (theory) with its purpose in adult education (practice), Bertaux articulates a central premise of the use of life history in adult education: " The endpoint of the telling of the life history is situated *in the participants, in their formation and transformation.*" (my emphasis)

Much current writing on the use of the life history approach in adult education and training is in French by French, Canadian and Swiss adult educators. In addition, training programs using this approach in France are far more educational due to government support for such programs and mandatory economic contributions and release time for workers and employees from businesses. Adult educators using this approach refer to it not only as life history but also as educational biography and autobiographical projects. Their focus seems to be on the education and training of adult educators and trainers. Some examples of their ideas and strategies are made evident in the following quotes.

" What I call educational biography is a specific version of the life history approach that I use as a methodology of group reflection about learning, based on the interpretation by adults of their own reconstructed learning processes...The educational biography seems to be an original way to reflect critically about

knowledge, the values, and the meaning constructed by adults through their life experiences."

P. Dominice, "Composing Educational Biographies: Group Reflection Through Life Histories," in Mezirow and Assoc. (eds.), Fostering Critical Reflection in Adulthood, p 194

" Adult learning cannot be separated from the life and the life history of the adult person. As such, adult learning is intimately tied to an overall, lifelong process of adult transformation."

"The philosophy of my biographical method... can be summarized as follows:

1. Adults best know their transformative processes and the symbolic environment within which these processes have a meaning.
2. The researcher can have access to these processes only through the understanding the adults have of them.
3. Such understanding is not 'objective' but retrospective, i.e., determined by each person's 'here and now perspective', which in turn cannot be separated from his/her life history.
4. Therefore, a more 'objective' understanding of the adults' transformative processes can only be obtained after the adults have critically reflected upon their 'here and now perspective.'
5. This 'critical awareness' is not only the result of a transformative process, but also a necessary condition for the biographical research; in other words, transformation and research cannot be separate.
6. This transformative dimension is reinforced by the practice of the biographical method within small groups, where each member of the group tries to understand the transformative processes of the other ones; this understanding in turn offers every participant the chance to critically question his/her own interpretations from the perspectives of others.
7. Sharing each other's understanding is the necessary condition for theorizing each participant's transformative process within the biographical group."

Matthias Finger, "The biographical method in adult education research" p. 33, 35-6.

Although adult educator S. Brookfield's work is not situated in the tradition of life history or educational biography, his critical incidents technique draws from similar theoretical sources. We quote him here because we find that his thinking

offers us the possibility of using the life history approach in a more limited and compressed way in training models such as the one we have imagined.

" As a means of probing learners' assumptive worlds, the critical incident technique is rooted in the phenomenological research tradition and presumes that the learners' general assumptions are embedded in, and can be inferred from, their specific descriptions of particular events. As with all phenomenological approaches, the purpose is to enter another's frame of reference so that that person's structures of understanding and interpretive filters can be experienced and understood by the educator, or a peer, as closely as possible to the way they are experienced and understood by the learner."

" Their [critical incidents] value for fostering critically transformative learning is twofold. First, because critical incidents are accounts written by people about actions in their own lives, they are incontrovertible sources of data representing learners' existential realities. Critical incident responses stand alone as primary data sources giving insights into learners' own. Second, critical incident exercises are much less threatening to complete than asking learners to respond to general questions."

MODEL TRAINING PROGRAM

A. PROGRAM GOAL:

To train providers of care (CNA's) to the frail elderly in the skilled Nursing Facility context to become more self-conscious in their practice by confronting their assumptions about the elderly, and to encourage the empowering of their elderly patients.

B. OBJECTIVES:

1. To understand the changing nature of aging in our society;
2. To explore individual values and social experiences that shape our ideas about aging;
3. To examine how they influence the giving of care in health care settings;
4. To learn to respect and validate the elderly.

C. DESIGN:

1. The program is based on 12 hours of training to take place over a three week period while the trainees are either orienting to or working in the Certified Nurse Assistant (CNA) job.
2. The trainees will be a group of approximately 20 persons pulled from several different work sites who will meet at a non-workplace location such as a community-based senior center.
3. Trainers will be drawn from backgrounds in Adult Education, Gerontology, and Health Care.

SESSION ONE: 7 HOURS
A LIFE HISTORY APPROACH TO UNDERSTANDING
CONCEPTIONS OF AGING

Morning Session - 3.5 HOURS

1. Introduction to the training program
2. Informal oral presentations by participants from personal experience of memories both happy and unhappy of relationships or encounters with elderly persons
3. Participants divide into groups of three giving each other assigned roles of interviewer, interviewee, and recorder. Based on having heard first impressions by all participants, interviewer aids interviewee in examining assumptions both personal and cultural about the nature of aging and the elderly. The recorder transcribes the interview. Each participant takes each part during the session resulting in three reports of interviews

*** LUNCH BREAK ***

Afternoon Session - 3.5 HOURS

1. Reading out of each report to the total group
2. A discussion, led by trainers, whose goal is:
 - a. to explore the differences and similarities of peoples' experiences from personal, cultural, and social perspectives;
 - b. to understand the difficulties of aging in the United States.
3. Presentation of homework project for next session which consists of 2 reports:
 - a. done individually: short written descriptions of both a positive and negative encounter or experience with a patient with whom you have worked;
 - b. done with others from the same work site: description of work situation with attention to
 - 1) how the work day is organized

- 2) number and nature of tasks expected of workers and the time it takes to perform them
- 3) relations with co-workers
- 4) relations with supervisors.

SESSION TWO: THREE HOURS
UNDERSTANDING WORKING WITH THE ELDERLY

1. Sharing of personal experiences drawn from work
2. Trainers lead group toward understanding of problems of working with elderly patients:

- a. Pick several common problems from the reports of negative experiences at work;
- b. group discussion of cause of problems and how they could have been handled differently drawing on participants positive experiences and analyses of their work situations, recognizing the constraints imposed by the conditions of work.

3. Homework assignment for session three:

Write a short statement expressing ideas about an ideal caregiver. Pay attention to their conception about themselves and their workstyle with the elderly.

SESSION THREE: TWO HOURS
DEVELOPING A WORKSTYLE

1. Sharing of visions of ideal caregivers
 2. Discussion led by trainers stressing:
 - a. caregivers can understand where we get our ideas about the elderly but we are not bound by them;
 - b. caregivers can choose from among different workstyles one that feels comfortable, allows the work to get done and encourages independence and a sense of empowerment in elderly patients.
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