

2008

Using observation for reflective practice with older people

Mark Hughes
Southern Cross University

Karen Heycox
University of New South Wales

Publication details

Post-print of: Hughes, M & Heycox, K 2008, 'Using observation for reflective practice with older people', *Educational Gerontology*, vol. 34, no. 3, pp. 1-21.

Published version available from:

<http://dx.doi.org/10.1080/03601270701835841>

ePublications@SCU is an electronic repository administered by Southern Cross University Library. Its goal is to capture and preserve the intellectual output of Southern Cross University authors and researchers, and to increase visibility and impact through open access to researchers around the world. For further information please contact epubs@scu.edu.au.

Using Observation for Reflective Practice with Older People

Short title: Observation for Reflective Practice

by Mark Hughes and Karen Heycox

Affiliation: School of Social Sciences and International Studies,
University of New South Wales

Address: Social Work Program
School of Social Sciences and International Studies
University of New South Wales
Sydney NSW 2052
Australia

Using Observation for Reflective Practice with Older People

Abstract

This article discusses the use of observation for reflective practice with older people, particularly the benefits and challenges of this learning tool. It outlines a study with 26 third-year Bachelor of Social Work students who undertook an elective course on reflective practice with older people. Using qualitative document analysis the authors found that while there were a range of challenges in conducting these observations, overall the students identified both personal and professional gains from their experiences. Particularly useful were the identification of ageist practices within the setting and the development of a degree of emotionality, criticality and reflexivity through their experiences.

Introduction

Concerns have recently been expressed that despite population ageing, social work with older people is less popular than other areas of practice, such as work with children and families (Volland & Berkman, 2004; Weiss, Gal, Cnaan & Maglajlic, 2002). Consistently studies indicate that although social work students may not be overtly negative towards older people, they do hold less than positive views about them and are unlikely to identify an interest in working with them in the future (Anderson & Wiscott, 2003). Less positive attitudes are particularly apparent towards people over the age of 75 and in relation to perceptions about an older person's health status and independence (Hatchett, Holmes & Ryan, 2002; Heycox & Hughes, 2006).

These studies reflect more general attitudinal research which suggests that while overtly negative views – such as hatred and dislike – are not often expressed towards older people and may lead to social disapproval, implicit negative attitudes are common and are likely to lead to paternalistic behaviour (Packer & Chasteen, 2006).

Ageism, in general, is identified in psychological research as a response to a fear of death; older people represent younger people's deteriorating future selves (Martens, Goldenberg & Greenburg, 2005). It is one of the most pervasive and least challenged forms of discrimination (Nelson, 2005) and is socially and culturally institutionalized through a youth-obsessed consumer culture (McConatha, Schnell, Volkwein, Riley & Leach, 2003). According to Packer and Chasteen (2006, p. 221) ageing 'represents a transition between membership in a current in-group and membership in an out-group.' Ageism intersects with other forms of discrimination, such as racism and sexism, and plays out differently depending on particular historical and spatial contexts (Pain, Mowl & Talbot, 2000). It manifests itself in practices ranging from patronizing language (such as overaccommodation and baby talk) in everyday life to a focus on disease management rather than prevention in medical practice (Nelson, 2005).

In research on social work students, factors associated with more positive attitudes towards older people and an interest in this area of practice include having had a prior close relationship with an older person (Cummings, Galambos & Decoster, 2003; Gorelik, Damron-Rodriguez, Funderburk & Solomon, 2000; Hatchett et al., 2002). Exposure to a specific module on ageing as part of a social work program, particularly

if contact with older people is facilitated, is also identified as positively affecting attitudes and interest levels (Heycox & Hughes, 2006; Tan, Hawkins & Ryan, 2001).

The present paper reports on the features of one such module – an elective course entitled ‘Reflective Practice with Older People’ – developed at the University of New South Wales. The paper focuses on the use of observations of aged care settings to facilitate reflective practice, as well as a critical understanding of ageism, power and difference within the setting. It presents the results of a document analysis of students’ observational reports and reflection papers.

Reflective practice and reflective learning

The concepts of reflection and reflexivity are gaining increasing attention within social work. This mirrors increased usage of similar concepts in contemporary theory and social research, such as in debates about reflexive modernization (Beck, Lash & Giddens, 1994) and the involvement of researchers in the co-construction of knowledge (D’Cruz, Gillingham & Melendez, 2007). D’Cruz et al. (2007) acknowledge the considerable disparity within the social work literature in how these concepts are employed. We use ‘reflective practice’ as an overarching concept that is primarily grounded in Schön’s (1983) notion of the reflective practitioner, but that is broad enough to also encompass concepts such as critical reflection (in its awareness of power) and reflexivity (in its continual questioning of the sources of knowledge).

Reflective practice in this vein is antithetical to a ‘legalistic, procedural and competency-driven paradigm’ in social work practice and education (Briggs, 1999, p.

148). According to Le Riche (1998, p. 34) reflective practice 'involves the practitioner in a continuous internal dialogue in which the relationship between the professional self and the personal self is kept alive and thought about.' There is a sense that reflective practice involves striving for authenticity and integrity in everyday encounters (Tanner, 1999). It recognises that each person's context impacts uniquely so that practitioners will need a capacity to respond in creative, flexible and meaningful ways, albeit within existing structures and processes. For Payne (1998) it involves looking under the surface of presenting situations to uncover their complexities and ambiguities.

Central to the concept of the reflective practitioner is an openness and capacity to engage in ongoing learning processes. Reflective learning draws on phenomenological and constructivist approaches to knowledge (Dempsey, Halton & Murphy, 2001). In addition to Schön (1983), reflective learning ideas make use of the work of Dewey (1933) and Kolb (1984), both of whom articulate an inquiring process that involves constant checking out and providing feedback. It requires frequent reflection on events and the practitioner's role in them. Drawing on Schön's conceptualization, Hughes and Heycox (2005) identify three key stages in reflection:

1. Preparatory reflection and sifting through knowledge in anticipation of intended action;
2. Reflecting and applying knowledge while engaging in action ('reflection-in-action in Schön's terms); and
3. Reflection after having taken action ('reflection-on-action').

Boud and Knights (1996, p. 26) argue that reflection-on-action involves three stages: 'returning to the experience, attending to feelings connected with the experience and re-evaluating the experience through recognising implications and outcomes'. The aim of reflective learning, as with reflective practice, is to reach a deeper level of understanding. In relation to organisational learning, this involves moving beyond single-loop learning – identifying error and making corrections so that existing goals are better met – towards double-loop learning – whereby the learning challenges the organisation's underlying normative order (Argyris & Schön, 1978). From this position the benefits of reflective learning lies in its transformative potential.

The transformative capacity of reflective learning is taken further by developing a degree of criticality and reflexivity. According to Adams (2002, p. 87) 'reflectiveness is a stage on the way to criticality. It is not sufficient to be reflective. We need to use the understanding that we gain from reflection to achieve change.' Thus reflection needs to facilitate an understanding of power relations and the construction and experience of difference in human service settings. This in turn should lead to an awareness of the need for and capacity to engage in action. It is important to also develop a degree of reflexivity by subjecting one's own and others' assumptions, definitions and values to ongoing critical scrutiny (Payne, Adams & Dominelli, 2002).

Observation in reflective practice

Links between reflective practice and observation are most clearly expressed by a range of scholars and practitioners influenced by the Tavistock Clinic's model of infant observation, drawing on the work of Bick (1964) and Bion (1962). Tanner

(1999) and Briggs (1999) link Bion's notion of reverie – an emotional process by which a mother allows a baby's experiences to enter her mind so that she can better respond to the child's needs – and the process of reflection as conceptualized by Schön (1983). These authors particularly emphasise an emotional attending during observations that creates a space for reflective learning. More specifically this involves:

- Developing an awareness of the emotional impact of the observation on the observer;
- Becoming attuned to the emotionality within the situation;
- Actively moving from processes of seeing to thinking;
- Developing an awareness of the meaning of sequences of behaviour and interaction;
- Generating tentative hypotheses about what is observed rather than jumping to conclusions; and
- Understanding observational experiences in relation to wider interpersonal and external factors, such as difference, power and authority (Briggs, 1999).

This emotionally aware approach to observation stands in marked contrast to rationalist and positivist approaches. For social work students it provides them with 'the opportunity to learn the capacity to think and reflect, to contain and process powerful emotions, and to think about what they themselves bring to any situation in terms of the own past experiences, their own beliefs and prejudices.' (Miles, 2002, p. 209) For many students a key challenge is holding back from 'doing' so that a space for thinking and attending to emotions can be created (King, 2002).

In striving for double-loop learning, criticality and reflexivity, observation for reflective practice needs also to facilitate an understanding of power. Tanner (1998), in presenting an equality model of observation, demonstrates the need to attend to both individual experience and structural processes. This model involves the development of a 'power lens' in observational encounters. This includes becoming aware of the power that can co-exist with an observer's gaze and paying particular attention during reflection activities to the expression of power and difference in the encounters. Importantly, Tanner advocates post-observation reflection that considers how, given the observational learning, more equitable practice can be developed. Miller-Pietroni (1998, p. 120), reflecting on student observations of an older man in residential care, notes that 'by ensuring that professional defences are disturbed in a productive way, the system and the human beings within it can be re-viewed. Thus habitual patterns of professional and institutional behaviour become available for influence.' Consequently the approach to observation for reflective practice that was developed at the University of New South Wales emphasises the importance of attending to both power and emotionality.

The observations

In the third year of the four-year Bachelor of Social Work program students select a practice-based elective course from a series of alternatives. The course 'Reflective Practice with Older People' has operated since 2002 and has consistently rated well in terms of student satisfaction and learning gained (Hughes & Heycox, 2005).

A key component of this course is the requirement that students undertake two observations in health or human service settings where older people are likely to be present. To minimise the level of intrusion on the older people and significant others, students are required to locate a relatively public space in which to carry out the observations. This is usually a hospital or doctor's waiting area, an activities room in a day centre or residential home, or a senior citizens' centre. Once they locate an appropriate setting, the students are then required to negotiate permission to spend two separate one-hour periods of observation there. Further they need to identify a location within the setting where they can sit quietly, with a good view of what is happening and where they would not be overly intrusive.

On completion of the observations students are asked to submit for assessment two observation reports, a reflection on both observations (referred to as the reflection paper), and a theoretical discussion paper linked to an issue arising from the observations. The present paper focuses only on the actual observation reports and the reflection paper; it does not look at the latter piece of assessment. The aims of the reports and reflection paper were to assist students to reflect on the experience of conducting the observation and to identify learning gained, particularly in terms of awareness of power inequalities and the negotiation of difference. Students were provided with two pro-formas that included a series of questions to which they were required to respond (Appendices A and B).

While it was not intended that the structure of the reports and reflection paper would overly restrict the focus of the observations, inevitably knowing that they had to respond to some particular questions would have directed students' observation

experience in some way. Nonetheless, students were encouraged to stay open to and reflect on a range of experiences during the observations. They were also encouraged to record their experiences, where appropriate on the pro-formas, in a narrative format.

The study

This study involved a qualitative document analysis of the observation reports and reflection papers that were submitted for assessment by one year group. Document analysis is a means of analysing readily available material, without having to conduct primary research. For us, it meant that we could unobtrusively examine students' experience of conducting observations, their analysis of power, difference and ageism, and their identification of the learning and benefits gained. A key limitation of document analysis is that the researcher is reliant on material not originally constructed for research purposes and thus the research questions are confined to those that can be answered by the material (Hakim, 2000). In our case, this was not a major disadvantage as our research interests closely matched the documents' content. Additionally, we had the added advantage of having previously constructed the format of the documents (albeit for learning and assessment purposes).

Four key criteria are identified by Bryman (2004), following Scott (1990), as important in evaluating the quality of documents and their suitability for analysis.

These are:

- Authenticity: is the material genuine?

- Credibility: is it free of error and distortion?
- Representativeness: is the material typical?
- Meaning: can the meaning of the documents be clearly interpreted?

Similar to Bryman's (2004) account of official documents, the students' observation reports can be seen to be authentic (in that they have not been fabricated) and meaningful (in that the meaning of the material can be fairly easily discerned). However, like official documents, there may remain questions over their credibility and representativeness.

With respect to representativeness, we studied all the reports that were submitted in one year of the course. While this may call into question how representative the findings are in relation to other years, this approach was necessary because the structure of the reports have been varied somewhat from year to year. Nonetheless, it is our observation that the reports of the studied cohort are not markedly different from that of other year cohorts.

In terms of credibility, it must be acknowledged that students constructed the material in such a way as to meet marking criteria set by the course coordinators and to (hopefully) achieve a good result. It is difficult for us to gauge whether or not a student may have overemphasized a point (e.g. about power differentials) in order to gain the approval of the marker. While the reports were not specifically structured in narrative format, in many ways students have fashioned a story of their observation experiences (facilitated in part by the ordering of the reports into pre-, during- and post-observation reflections). This may have led them to leave out some experiences

that do not conform to the overall message they wished to convey. While this is a limitation that needs to be borne into account when interpreting the findings, we did not feel it provided sufficient grounds (particularly for a qualitative study) for discounting the documents as sources of data.

With students' permission, copies of their submitted reports and papers were retained by the authors. A broad qualitative approach to the analysis of the documents was adopted. This involved identifying themes and patterns within the data. However it is important to note that the structure of the observation reports generated material in a thematic way. Nonetheless under most themes data were extracted across multiple sections of the documents. Some narrative segments were also identified in the data, although the availability of this material was limited due to the structure of the report and note-taking style adopted by some students.

A total of 78 documents were analysed; including 52 observation reports (two per student) and 26 reflection papers. The 26 students conducted their observations in hospital reception areas (13), residential care activities rooms (6), day centre activities rooms (4), and medical practitioners' reception areas (3). Twenty-three students were female. Students were mostly of Anglo Australian background (16) or non-Anglo European background (4) with a small number of Asian Australian background (4), and only one of Middle Eastern and one of Asian background. All but one of them was under 25 years of age.

Understanding of ageism, power and difference

In terms of ageist practices observed, students most commonly highlighted concerns about interpersonal communication, such as patronizing behaviour. One student who conducted her observations in a nursing home said: 'Residents were spoken to as if they are children, [for] example loud pitch, simple sentences.' This was also apparent in interactions between older people and accompanying younger people. In her observations of a hospital reception area, a student said:

I witnessed verbal communication between an older man and a younger woman (possibly his daughter). She talked slowly and extremely loudly at him, which probably was not necessary, as he seemed to understand fine. I witnessed similar verbal communication between the receptionist and a very old man. She talked really loudly and really slowly at him and then got annoyed when he didn't quite get her directions.

Students also reported staff acting in a rude and intimidating manner. In relation to another hospital clinic reception area a student commented: 'Some staff got impatient listening to elderly patients and noticeably communicated non-attention by looking away and even non-verbally communicating their boredom with colleagues as they walked by.' Some reported that staff sometimes ignored the older person and instead focused their attention on a younger person who was accompanying them. In another reception area a student reflected on his observation of a younger woman accompanying an older woman who was asking for directions:

The younger woman began to talk over her. The receptionist then began talking to the younger woman, disregarding the older woman completely. I

watched this and whilst the receptionist and the younger woman were talking the older woman had such a look of frustration and despair on her face.

Students also reported that older people were sometimes made to wait excessively ('waiting a long time ... illustrates that people are reliant on others') and at other times rushed with little regard to the impact of this behaviour on them ('people were just shoving past older people or those who were frailer, or deliberately walking closely behind them').

The presence of ageism in the physical and social structures of the agencies visited was recognised by some students, albeit less commonly than in relation to interpersonal communication. One student recognised staff rushing as potentially reflective of the pressures of their work environment: 'Everybody seemed to be in such a rush and so my mind was questioning why they felt they had to rush and thinking about the impact of policy on their practice.' Another student was able to look beyond the obvious in reflecting on the apparent dynamics in the relationships between older people and accompanying younger people:

It occurred to me after the observation when I was writing up my notes, how much the older people I witnessed depended on their children and younger family members to navigate the hospital. Then I started to think whether this was by choice or whether it was the hospital system choosing to deal with an older person's family instead and cutting out the older person even though they are in actual fact the client.

Lack of choice and flexibility was widely commented upon. One student who conducted his observation at a nursing home reflected that set meal times might be disempowering leaving residents with no 'freedom to plan one's day'. Physical barriers were also noted – particularly the location and height of reception desks in waiting areas. In one situation:

An older woman needed to show her Medicare card to the receptionist. The woman had a walking stick in one hand and a bag in the other. She needed to put her bag on the reception counter in order to get her card out, but the counter was too high for her to put her bag on. She struggled for some time yet the receptionist did not offer to help or even ask if she was okay.

Others commented on poor signage, unsafe flooring, blocked passageways and heavily congested areas. For one student a physical barrier represented a much wider power differential: 'You could see that those in the higher power stood behind the nurses' station and it was barricaded off, whereas those without (the residents) stood around it.' Similarly, for another student: 'The fact that silence was a norm within the waiting room ... gives insight into the formality and power a structure can unknowingly present.'

Together with the interpersonal barriers, these physical and social barriers produced for some students a clear sense that older people were accorded less power and status within the setting. According to one student, who observed in a nursing home undergoing some refurbishment, there was a sense that there were 'normal' and 'not normal' groups.

The first group contains the nurses, visitors and the construction workers. The latter group contains the residents. Basically when various members of the first group interacted together they treated each other as normal. However when the nurses treated/interacted with the residents it was mostly with a patronizing attitude.

Other distinctions, such as in the type of clothing worn, marked out certain people within setting as having more status. 'The manager ... was dressed in an executive suit. ... I believe this was one way she was able to represent her status.' Power was also represented in the way knowledge was conveyed or withheld: 'information [about an appointment] was not given to [an older lady] although it was likely that the staff member could have provided more information about the situation.'

As discussed, students frequently reflected on differences in age and role/status in the setting. Other reflections on difference similarly tended to focus on more physically obvious and directly observable differences between people – such as gender and ethnicity – rather than less obvious ones, such as sexual identity. According to one student:

I found age, ethnicity and gender differences to be quite obvious. With age and gender I found residents normally hanging around with people they associated with. For instance, the Asian residents stayed together and younger people [were] grouping together.

Others noted that staff tended to interact differently with people for whom English was assumed not to be a first language. This involved staff and others in the setting speaking more slowly and using more non-verbal gestures. Some students noticed that older men seemed to be less well catered for in the activities rooms largely because of their small number. They were also seen to frequently sit together and to generally engage less in the activities taking place. Differences in impairment were also acknowledged and, as suggested by the following student, mediated the impact of age-related differences:

My eyes were really opened to how *different* people, in this case older people, can be at the same age. Some were hunched over and sick looking, whereas others had tattoos and were running around like teenagers. Even one of the workmen outside was of similar age to the people in the hospital.

Despite the numerous examples of ageist practices that students observed, they were also able to give examples of more positive practices. One student noted that older people in a residential home were given the choice of whether or not to participate in activities: 'I thought a good part of the service was that none of the older people were made to feel like they had to join in the activity.' Another commented on the patience that was exhibited by staff, which in the following situation was used to facilitate participation.

The worker would pretend to throw the ring as well so I guess to make the lady feel part of the group and the game. Even though the game was repetitive and boring, there wasn't any impatience from the workers.

Other students commented on the positive qualities demonstrated by staff, including their ability to ‘maintain a friendly and respectful environment’ and their treatment of clients ‘with a sense of respect, dignity and worth.’

In reflecting on ways of facilitating more equitable practice within the observed settings, students noted the importance of physical adjustments, such as creating more space, being more accessible, better facilitating privacy and reducing physical representations of status. Overall, though, students emphasized most consistently the need for improved staff communication skills (e.g. via training). ‘Staff need to respect older clients and take time out to actually explain things in a more comprehensive way, not just shout slowly at them.’ Other suggestions included adjustments to clothing practices in residential homes: stopping staff wearing uniforms and patients wearing pyjamas.

Issues in conducting observations

In this study a number of important issues were identified by students in carrying out their observations. Each student’s personal context provided a frame for their observation experiences. A number of students indicated that at certain points the observation triggered personal memories and emotions that in turn affected their experience. One student commented: ‘I did lose focus at times when incidents reminded me of my grandparents.’ Others indicated that they had pre-existing expectations of the observations given prior experiences. One student had had positive

experiences visiting relatives in nursing homes and so she 'expected the quality of care to be high.'

Some students also expressed a degree of anxiety prior to undertaking the observations and this may have affected their ability to attend to the observational experience. One commented on her uncertainty about the setting of the observation: 'I wonder what it will be like there? Will it be safe for me?' Another was concerned about what could happen during her time there: 'I was feeling a bit anxious about what might happen in the hour of my observing.' Anxiety frequently related to feeling out of place and having people wonder why they were there: 'I was unsure how my presence would be taken by the centre's clients.'

Most students reported difficulties staying focused during the observations. One said that 'it was hard not to daydream.' While another noted that increasing her attention on one aspect of the experience distracted her from the wider experience: 'When residents had visitors I got distracted watching them and lost focus because I was wondering if everyone had visitors and because it would be sad for those that didn't.' Some said that the large amount of action taking place in the setting meant that it was not always possible to stay focused on everything going on. A preoccupation with the outcome of the observation – the writing of the reports and reflection paper – could also distract them from the processes occurring in the actual experience of the observation. As one noted: 'I also felt quite overwhelmed. Mainly because I wanted to rush home as soon as possible so I could jot everything down before I forgot it.' Others were worried that they would not have enough to report on.

Many students also expressed anxieties about how to maintain their observer's stance. As social work students they were concerned about the need to 'act' and therefore tended to see observation as a more 'passive' experience. Rarely did they acknowledge the action involved in the observing and reflecting processes themselves. The almost 'rescuer' position taken by some students is demonstrated in the following comment: 'I really felt that I wanted to do something for these people in order to make their life a bit more stimulating.' Another highlighted her uncomfortable position in not being able to show that she was occupied with acceptable tasks: 'I felt awkward just sitting there not helping with morning tea or sitting and talking with the older people while all the volunteers and staff were busy.'

At a practical level, students' location within the setting also had implications for what they could observe and how the experience unfolded. In some settings (such as activities rooms) being located 'close to the action' increased the chance that people could try to engage with them. Some students felt at a loss as to how to respond especially in a way that was not offensive to the other person. One said: 'It was very hard not to interact. At times I felt rude. Some would smile, and I would back. But then [I] had to turn away in case they spoke to me.' Other practical issues noted by students included difficulties gaining permission to carry out the observations, particularly in terms of having to negotiate different levels of administration within an organisation.

For social workers ethics is an area often discussed in their training so it was not surprising that these students often commented on the ethical issues involved in carrying out their observations. Two inter-related ethical issues were of particular

concern. While students conducted their observations in relatively public spaces, they were exposed to private and intimate interactions between people in these spaces. For example, if they were sitting in day centres or hospital reception areas they could sometimes overhear private conversations between family members. One student noted: 'I listened to one conversation between two friends. An older man and woman. They were having a catch-up conversation. I felt uneasy imposing on their privacy so I didn't listen for long.' Students were particularly concerned that most of the people in the setting were unaware that they were doing an observation exercise. A student stated: 'I was hoping the older people wouldn't feel I was eavesdropping on them.'

Thus, related to this issue of privacy was the issue of obtaining consent to carry out the observations. As noted, students were required to gain the consent of an administrator prior to carrying out the observations, however whether or not they could obtain consent from other people (including older people) present in the setting varied from place to place. In most cases the large volume of people through the setting meant that it was not possible to gain their consent or even to inform them that an observation was taking place. Thus, while the observations were not intended to be a covert or deceptive activity, they inevitably felt that way for many students. One student felt that it was 'deceptive as I do not have consent to observe my subject's behaviour.' Another said: 'I kept thinking, "I wonder if these people realize that I am observing them?"' And I felt really slack for them not knowing what I was up to.'

While many of the students were able to see the ethical dilemmas involved in conducting the observations, it was notable that not all students identified issues around privacy and consent. Also, a couple of students seemed unaware of possible

issues that could have arisen from prior engagement with the setting. These students knew staff members present in the setting from previous work experience. They did not highlight the ways in which this might have affected their ability to reflect critically on the setting and the practices of staff.

Benefits of observation

Despite some of the issues encountered by students in conducting the observations, most felt positive about their experience and appreciated its value as a learning tool. One student commented: 'I feel good as I have learnt about observation as a form of social inquiry and feel confident about using this skill to enhance my future practice.' Some felt that they were now more aware of the diversity in older age as this experience had enabled them to see a range of older people in terms of age, ability, health, and ethnicity. 'This learning can only be a positive impact on my practice as it is an example of challenging my perceptions and constantly being open to changes and different directions.' Also the experience challenged them as they became aware of some positive images of older people particularly where they were performing non-stereotypical roles such as providing practical or emotional support to family, friends, staff, and being able to negotiate their own affairs. As one student stated:

I feel that a major link is related to my personal bias towards all old people being infirm or needing help in some way. My stereotypical notions were challenged in the observations. Some people may need help, but most do not need help at all, and are quite comfortable and able to look after their affairs.

Students also highlighted a number of professional benefits. They became more aware of the needs of specific population groups, not only older people, but also people with disabilities and those from non-Anglo backgrounds.

Importantly all students were able to identify a range of ageist practices directed by both staff and significant others towards older people within the observation space. Some students found this challenging, particularly when reflecting on their own future selves. 'I thought to myself that I didn't want to be in residential care when I got older and that it seemed to be a lonely, unstimulating life there.' Others reflected on what might happen to their own family members: 'It was upsetting to think of my parents reaching that stage of life and being so helpless.' Many were given the opportunity to reflect on their own ageism as well as their own future ageing. Several commented on how they realize, on reflection, that they had personally engaged in ageist behaviours: 'I began to question my own treatment of the elderly and I realized that in some cases I probably too project an ageist attitude.' Another noted that she feels 'angry and ashamed' at the treatment of older people in health settings by others and at times by herself.

As mentioned most students highlighted a range of ethical issues that occurred for them while arranging and conducting the observations. Thus a key benefit was this further opportunity to reflect on ethical issues in professional practice and in human service settings. From what they observed they were able to comment on possible strategies for changing interpersonal communication as well as the structure of the physical environment. They also talked about the possible benefits in staff training,

particularly for staff often forgotten for their significant contribution to services (e.g. receptionists and cleaners).

Finally as well as seeing classroom discussions and activities transformed into real setting examples, they were able to reflect on how these examples had relevance to their theoretical understandings. One student commented in relation to this last benefit as well as the impact of the exercise on their own attitudes towards how to relate to older people:

After the observations the various theories made much more sense because I could see aspects of these in practice. I also learned that it was important to encourage those working around you to treat older people with respect and keep them informed too about how to be effective in practice with older people.

Discussion

Through this exercise students were provided an opportunity to observe relatively public health and human service settings where older people were present. In the main students observed in residential or day centre activities rooms and hospital or general practitioner waiting rooms. The impact on clients of physical environment and spatial design is increasingly being recognized both in relation to waiting rooms (e.g. Leather, Beale, Santos, Watts & Lee, 2003) and the public and semi-public spaces in residential facilities (Barnes, 2006). In their reports and reflection papers some students were able to identify the ways in which physical barriers (such as desks and

other furniture) represented differences in power and authority within the setting.

Some students also reflected on issues of privacy – a key issue in the delivery of aged care in Australia (Hughes, 2004) – in terms of the opportunities for both intimacy and confidentiality within the structure of the settings.

The students' observations exposed them to front-line practice with older people and their significant others. Most of the encounters observed between staff and older people involved reception staff, ancillary nurses, domestic staff (such as cleaners) and personal carers. For many older people these staff members are either their first point of contact with the health and aged care systems or the people with whom they have most frequent contact. While not all interactions between such staff and older people were identified by students as being problematic, they did report a number of occasions of insensitive, unresponsive and potentially ageist practices. Some of these practices (such as making people wait excessively) appear similar to the overly rigid organisational practices identified by Lipsky (1980) in his conceptualization of street-level bureaucrats. In classroom discussions based on their observation experiences we encouraged students to look not just at the interpersonal dimensions of these practices, but also their wider social and political dimensions. It is well acknowledged that within Australia these front-line employees are more likely to be employed part-time and to be dissatisfied with their working conditions and remuneration. For example, in a study of 1000 nurses employed in residential aged care facilities, respondents reported 'their jobs to be poorly rewarded, with a heavy workload, physically demanding, emotionally challenging and stressful' (Eley, Hegney, Buikstra, Fallon, Plank & Parker, 2007, p. 869). Furthermore they were critical of their pay levels, amount of time spent on paperwork and the barriers to taking up training. Importantly

front-line workers in aged care are also more likely to be women. A survey of aged care facilities in 2003 found that 94 per cent of the industry's 116 000 direct care workers were women (Richardson & Martin, 2004).

Thus while the students' experiences did generate an awareness of ageism, many students needed assistance recognising the structural and cultural contexts of ageism within the observed settings. The difficulty in moving beyond an individualising focus on attitudes towards an awareness of the institutionalisation of discrimination and disadvantage has been a key feature of debates on anti-oppressive practice (McLaughlin, 2005). Similarly students required assistance in moving beyond their understandable focus on observable differences between people in the setting – such as in relation to gender, ability and ethnicity – to consider the implications for others with less immediately apparent differences, such as for non-heterosexual people. In seminars we discussed with students their assumptions about relationships when people of the same gender entered the setting together. In many cases they were assumed to be in parent/child or sibling relationships. Lack of consideration of non-heterosexual identities and relationships in these observations mirrors a similar degree of invisibility in social work practice and education (Trotter & Gilchrist, 1996).

The ethical issues students experienced while negotiating and conducting the observations provided points of reflection and analysis in relation to the power social workers and other employees exercise in everyday practice. As they undertake their day-to-day work social workers observe and attend to the experiences of others without necessarily gaining consent from these people or making them aware that they are being observed. While points of formal assessment (e.g. an assessment for

admission into residential care) may be openly discussed with older clients, informal assessment activities, such as observation, may be occurring on a continual basis.

Thus, with some assistance, students were able to recognise that some of their own ethical dilemmas around gaining consent to observe and infringing privacy mirror – albeit often unacknowledged – dilemmas in everyday social work practice.

Students' observations, their write-up of these experiences and the related classroom discussions did appear to stimulate reflective learning and, for some, a degree of emotionality, criticality and reflexivity in this learning. Students reported an emotional engagement with the setting and the people within it and in seminar groups were encouraged to see emotions as important sources of information in social work practice (Morrison, 2007). They also expressed an awareness of their own role in the setting and their own power through the act of observing. For many students the experience challenged their understanding of older age and enabled them to identify with the experiences of older people in the setting in ways they had not done in the past. For some it raised questions about their own ageing experiences and their hopes and fears for their own and their loved-ones' futures. In this way, the observational experiences were able to provide an opportunity for students to bring together their personal and professional selves and, we would argue, facilitate an authentic, empathic and meaningful reflection on older people's experiences within the observed settings. Importantly students were also able to consider options for transforming the setting or interactions to facilitate more equitable practice. Many also challenged themselves to respond in a more empowering and enabling way in their own future practice. As Adams (2002) argues, 'critical practice is self critical.'

Conclusion

In this paper we have outlined the use of observational techniques to stimulate reflective social work practice with older people. Students were able to develop and demonstrate an understanding of emotionality and power in their observational encounters, including an awareness of their own role and presence in the setting. Importantly students were also able to recognise ageist practices, processes and structures and consider the potential for restructuring the setting and practices to promote greater equity. Many were able to challenge their own assumptions about ageing and older people and reflect on the implications for their future work. The observational techniques employed provided a window into the dilemmas involved in older people's engagement with the service system and the complexity of this area of practice. We hope that for these students this will encourage greater interest in this area of work and provide them with an appreciation of gerontological social work as a challenging and worthwhile practice area.

Appendices

Appendix A: Observation report format (completed separately for each observation)

Part A: Pre-observation information

1. How was permission gained to carry out the observation? Who was consulted?
Were there any implications for how the observation would be carried out?
2. Describe the physical layout of the service setting and your location within the setting.
3. What were some of your thoughts and feelings prior to carrying out the observation?

Part B: Account of the observation

4. Jot down some of the events/incidents (no matter how minor) that occurred during the observation.
5. Describe the movement of people (older people, workers and others) through the service setting, paying attention to areas of congestion and avoidance. Note older people's location on the setting and any obstacles (e.g. personal, inter-personal, structural) that may have limited their movement.
6. Describe some of the different types of verbal communication you observed. As well as the content of the communication, pay attention to the language used and how this might have varied depending on who was interacting with whom.
7. Describe some different types of non-verbal communication you observed. Pay attention to communication such as gestures, prompts, posture, space, use of silences, avoidance.

8. Jot down some of your thoughts and feelings during the observation (regardless of how seemingly trivial). How did these thoughts and feelings impact on the observation itself (e.g. did they mean you lost focus at times or increased focus)?
9. Jot down some of your thoughts and feelings after the observation.

Appendix B: Reflection paper format (one completed for both observations)

1. How was difference expressed in the observations (e.g. age, gender, class, ethnicity, sexual identity, organizational role)? In what ways did others respond to difference? Please provide some examples.
2. How was power reflected in the interactions and older people's engagement with the service setting? Please provide some examples.
3. Were social work values, knowledge or skills evident in the observations (regardless of whether or not social workers were observed)?
4. Do you have any thoughts on how the interactions or the setting could be restructured to facilitate more equitable practice?
5. What are some links between the issues arising from your observations and issues from the literature or research on ageing?
6. Identify some areas of learning for you from your observations. How might this learning impact on your practice?

References

- Adams, R. (2002). Developing critical practice in social work. In R. Adams, L. Dominelli & M. Payne (Eds.), *Critical practice in social work*. Basingstoke: Palgrave.
- Anderson, D. & Wiscott, R. (2003). Comparing social work and non-social work students' attitudes about aging: Implications to promote work with elders. *Journal of Gerontological Social Work*, 42(2), 21-36.
- Argyris, C. & Schön, D. (1978), *Organizational learning: A theory of action perspective*. Reading: Addison-Wesley.
- Barnes, S. (2006). Space, choice and control, and quality of life in care settings for older people. *Environment and Behavior*, 38(5), 589-604.
- Beck, U., Lash, S. & Giddens, A. (Eds.), (1994). *Reflexive modernization: Politics, tradition and aesthetics in the modern social order*. Cambridge: Polity Press.
- Bick, E. (1964). Notes on infant observation in psychoanalytic training. *International Journal of Psychoanalysis*, 45, 484-486.
- Bion, W. (1962). *Learning from experience*. London: William Heinemann.
- Boud, D. & Knights, S. (1996). Course design for reflective practice. In N. Gould & I. Taylor (Eds.), *Reflective learning for social work: Research, theory and practice* (pp.

23-34). Aldershot: Arena.

Briggs, S. (1999). Links between infant observation and reflective social work practice. *Journal of Social Work Practice, 13*(2), 148-156.

Bryman, A. (2004). *Social research methods* (2nd ed.). Oxford: Oxford University Press.

Cummings, S. M., Galambos, C. & Decoster, V.A. (2003). Predictors of MSW employment in gerontological practice. *Educational Gerontology, 29*, 295-312.

D'Cruz, H., Gillingham, P. & Melendez, S. (2007). Reflexivity, its meanings and relevance for social work: A critical review of the literature. *British Journal of Social Work, 37*, 73-90.

Dempsey, M., Halton, C. & Murphy, M. (2001). Reflective learning in social work education: Scaffolding the process. *Social Work Education, 20*(6), 631-641.

Dewey, J. (1933). *How we think*. Boston: D.C. Heath.

Eley, R., Hegney, D., Buikstra, E., Fallon, T., Plank, A. & Parker, V. (2007). Aged care nursing in Queensland: The nurses' view. *Journal of Clinical Nursing, 16*, 860-872.

Gorelik, Y., Damron-Rodriguez, J., Funderburk, B. & Solomon, D. H. (2000). Undergraduate interest in aging: is it affected by contact with older adults?

Educational Gerontology, 26, 623-638.

Hakim, C. (2000). *Research design: Successful designs for social and economic research* (2nd ed.). London: Routledge.

Hatchett, B. F., Holmes, K. & Ryan, E. (2002). Attitudes of a predominantly Hispanic college sample toward older adults. *Journal of Gerontological Social Work*, 37(2), 45-59.

Hughes, M. (2004). Privacy in aged care. *Australasian Journal on Ageing*, 23(3), 110-114.

Heycox, K. & Hughes, M. (2006). Social work students' attitudes towards and interest in working with older people: An exploratory study. *Advances in Social Work and Welfare Education*, 8(1), 6-14.

Hughes, M. & Heycox, K. (2005). Promoting reflective practice with older people: Learning and teaching strategies. *Australian Social Work*, 58(4), 344-356.

King, R. (2002). Experience of undertaking infant observation as part of the Post-Qualifying Award in Child Care. *Journal of Social Work Practice*, 16(2), 213-221.

Kolb, D. A. (1984). *Experiential learning: Experience as the source of learning and development*. Englewood Cliffs: Prentice Hall.

- Leather, P., Beale, D., Santos, A., Watts, J. & Lee, L. (2003). Outcomes of environmental appraisal of different hospital waiting areas. *Environment and Behavior*, 35(6), 842-869.
- Le Riche, P. (1998). The dimensions of observation: Objective reality or subjective interpretation. In P. Le Riche & K. Tanner (Eds.), *Observation and its application to social work: Rather like breathing* (pp. 17-37). London: Jessica Kingsley.
- Lipsky, M. (1980). *Street-level bureaucracy: Dilemmas of the individual in public services*. New York: Russel Sage.
- Martens, A., Goldenberg, J. L. & Greenberg, J. (2005). A terror management perspective on ageism. *Journal of Social Issues*, 61(2), 223-239.
- McConatha, J. T., Schnell, F., Volkwein, K., Riley, L. & Leach, E. (2003). Attitudes toward aging: A comparative analysis of young adults from the United States and Germany. *International Journal of Aging and Human Development*, 57(3), 203-215.
- McLaughlin, K. (2005). From ridicule to institutionalization: Anti-oppression, the state and social work. *Critical Social Policy*, 25(3), 283-305.
- Miles, G. (2002). The experience of teaching and learning in social work. The teaching of young child observation: A historical overview. *Journal of Social Work Practice*, 16(2), 207-211.
- Miller-Pietroni, M. (1998). Beyond the bureauprofessional: Observational study as a

vehicle for interprofessional learning and user-centred practice in community care. In P. Le Riche & K. Tanner (Eds.), *Observation and its application to social work: Rather like breathing* (pp. 111-142). London: Jessica Kingsley.

Morrison, T. (2007). Emotional intelligence, emotion and social work: Context, characteristics, complications and contribution. *British Journal of Social Work*, 37, 245-263.

Nelson, T. D. (2005). Ageism: Prejudice against our feared future self. *Journal of Social Issues*, 61(2), 207-221.

Packer, D. J. & Chasteen, A. L. (2006). Looking to the future: How possible aged selves influence prejudice toward older adults. *Social Cognition*, 24(3), 218-247.

Pain, R., Mowl, G. & Talbot, C. (2000). Difference and the negotiation of 'old age'. *Environment and Planning D: Society and Space*, 18, 377-393.

Payne, M. (1998). Social work theories and reflective practice. In R. Adams, L. Dominelli & Payne, M. (Eds.), *Social work: Themes, issues and critical debates* (pp. 119-137). Houndmills: Macmillan.

Payne, M., Adams, R., & Dominelli, L. (2002). On being critical in social work. In R. Adams, L. Dominelli & M. Payne (Eds.), *Critical practice in social work* (pp. 1-12). Basingstoke: Palgrave.

Richardson, S & Martin, B. (2004). *The care of older Australians: A picture of the residential aged care workforce*. Adelaide: National Institute of Labour Studies, Flinders University.

Schön, D. A. (1983). *The reflective practitioner*. London: Temple Smith.

Scott, J. (1990). *A matter of record*. Cambridge: Polity.

Tan, P. P., Hawkins, M. J. & Ryan, E. (2001). Baccalaureate social work student attitudes toward older adults. *The Journal of Baccalaureate Social Work*, 6(2), 45-55.

Tanner, K. (1998). Towards an equality model: observation through a power lens. In P. Le Riche & K. Tanner (Eds.), *Observation and its application to social work: Rather like breathing* (pp. 39-61). London: Jessica Kingsley.

Tanner, K. (1999). Observation: A counter culture offensive. *International Journal of Infant Observation*, 2(2), 12-32.

Trotter, J. & Gilchrist, J. (1996). Assessing DipSW students: Anti-discriminatory practice in relation to lesbian and gay issues. *Social Work Education*, 15(1), 75-82.

Volland, P. J. & Berkman, B. (2004). Educating social workers to meet the challenge of an aging urban population: A promising model. *Academic Medicine*, 79(12): 1192-1197.

Weiss, I., Gal, J., Cnaan, R. A. and Maglajlic, R. (2002). Where does it begin? A comparative perspective on the professional preferences of first-year social work students. *British Journal of Social Work*, 32, 589-608.