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## Is 'elderspeak' always inappropriate? An empirical investigation of the use of elderspeak in dementia care

### ESRC DTP Collaborative Studentship

#### University of Nottingham and Nottingham University Hospitals Trust

The Midlands Graduate School is an accredited Economic and Social Research Council (ESRC) Doctoral Training Partnership (DTP). One of 14 such partnerships in the UK, the Midlands Graduate School is a collaboration between the University of Warwick, Aston University, University of Birmingham, University of Leicester, Loughborough University and the University of Nottingham.

The University of Nottingham, as part of Midlands Graduate School is now inviting applications for an ESRC Doctoral Studentship in association with our collaborative partner Nottingham University Hospitals Trust to commence in October 2020.

**Background:** Around a quarter of hospital beds in the UK are occupied by patients living with dementia (RCPsych 2013). Communication impairments are common across all types of dementia (RCSLT 2014) and often exacerbated by the hospital environment. Unsurprisingly, healthcare professionals report particular challenges in caring for this patient group, whilst trying to deliver person-centred care (Griffiths et al, 2014). However, whilst there is a growing body of research that underlines the importance of communication in dementia care, there is little that actually examines this communication in real time interaction. Suggestions and pointers for good communication do exist, but tend not to be empirically derived, and sometimes conflict with empirical findings. This project focuses on a specific aspect of communication around which there is a conflicting moral view and where the limited existing empirical evidence is mixed: the use of 'elderspeak'.

'Elderspeak' is defined as the use of systematic speech accommodations directed towards older adults. Features of elderspeak include speaking more slowly, leaving longer pauses, using shorter turn constructions, using repetition, and using terms of endearment such as 'dear' or 'darling' (Kemper 1994). Some authors have objected to the use of elderspeak on moral grounds, on the basis that it is similar in tone and register to 'infant speak', and is therefore patronising and infantilising to older persons (see Lowery 2013 for a review). However, empirical studies of elderspeak in a dementia-specific context present a mixed picture, with some studies suggesting it can improve communication and cooperation with care (e.g. Small et al 2000) and others suggesting it may increase resistance to care (Williams et al 2009) and so developing training interventions to reduce its use (Williams et al 2017). This mixed picture presents a dilemma for healthcare practice. The **Aims** of this project are therefore twofold: to provide a more detailed contribution to the empirical basis for delivering dementia care; and to develop a training resource for staff grounded in this empirical research.

**Research Questions:** This project will investigate the use of elderspeak in a hospital setting, in order to answer the following questions:

- 1) In what contexts is elderspeak used in the care of people living with dementia (PLWD), and by whom?
- 2) How is elderspeak received and responded to by PLWD?
- 3) What is the impact of local interactional context on receipt or rejection of elderspeak by PLWD? Does activity type (e.g. medical history taking vs assisting someone with eating) affect receipt?

**Methods:** To address these research questions, the PhD student will draw on an existing corpus collected for a recently completed (2018) NIHR funded study on which Harwood was PI and Pilnick and Goldberg were Co-Is. This comprises over 400 minutes of video-recorded interaction with PLWD in two acute Healthcare of the Elderly wards in a large UK teaching hospital. In this corpus, a range of healthcare professionals conduct routine interactions with PLWD including assisting with eating and drinking, conducting medical examinations, changing wound dressings etc. Given the detailed analysis involved, this dataset would be of typical size for a PhD project using conversation analysis (CA) as its primary method. However, in order to gain transferable skills in gaining NHS ethical approval and in data collection, the student will be supported to collect a small number of additional recordings (c10) to supplement the data set. CA is a sociological approach, drawing on insights from linguistics and psychology, which examines the structure and order of naturally occurring talk in interactions. Analysis focuses on verbal and bodily conduct and its social consequences. Intensive comparative analysis of multiple episodes will allow identification and explication of recurrent patterns and their consequences, thereby moving the analysis beyond individual psychological dispositions.

**Findings:** Because the findings of CA research use evidence endogenous to interactions, there are direct practical applications. All supervisors have considerable experience of successful practical application of their findings in healthcare settings; the training intervention developed from the recently completed NIHR study was shortlisted for an Annual National Dementia Award (Best Training Initiative 2018). Findings will provide a more nuanced picture with regard to how the different linguistic elements of elderspeak are received by PLWD, as well as whether there are recurring contexts in which professionals are more likely to use it or where it is more or less likely to create interactional trouble. These findings can be used to inform practice, to develop training resources, and to provide a highly detailed empirical contribution to the wider elderspeak debate.

**Outcomes:**

This project will make an important contribution to the empirical base for best practice communication in dementia care. It will respond to the need of healthcare professionals for training resources that are grounded in actual interaction, rather than in idealised notions of what interaction in this context should be. Improving the understanding of best practice in dementia care is at the forefront of NUH priorities for both patient safety and staff wellbeing. Additionally, findings will add to our wider sociological understanding of atypical interaction, continuing the work which has been done to identify which features of interaction remain universal in the presence of atypicalities (e.g. Antaki and Wilkinson 2012).

**Outputs:**

The findings of the project will be disseminated via high quality academic journal articles (e.g. *Sociology of Health and Illness*, *Social Science & Medicine*) and presentation at key conferences (e.g. BSA Medical Sociology Group). In addition, accessible project findings summaries will be sent to participants and key stakeholders including dementia charities and health and social care professionals. A training workshop on the use of elderspeak in dementia will be developed and delivered to healthcare staff within the Trust, responding to the training needs staff themselves have identified. ESRC Impact Accelerator funding is a future possibility for wider dissemination of the training resources.

## Bibliography:

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- Williams, K.N., Herman, R., Gajweski, B. and Wilson, K. (2009) Elderspeak Communication: Impact on Dementia Care, *American Journal of Alzheimers Disease and Other Dementias*. 24(1): 11–20
- Williams, K.N., Perkhounkova, Y., Herman, R., and Bossen, A. (2017) A Communication Intervention to Reduce Resistiveness in Dementia Care: A Cluster Randomized Controlled Trial, *Gerontologist*, Vol. 57, No. 4, 707–718.

## Application Process

To be considered for this PhD, please complete the Collaborative Studentship application form [available online here](#), and email it with cover letter and CV to [esrc-dtc@nottingham.ac.uk](mailto:esrc-dtc@nottingham.ac.uk). Shortlisted applicants will also be required to provide two references.

Applicants should have a minimum of a 2(i) undergraduate degree or Merit at Masters level, and be able to demonstrate an interest or relevant experience in the topic or method of the project. Applicants with backgrounds in social science or healthcare are encouraged to apply. Please note that a 3 year PhD award can only be made to candidates who have already fulfilled ESRC Core Training requirements. 1+3 and 3.5 year awards are available if training elements still need to be completed, and a decision on length of award will be made on a case-by-case basis.

**Application deadline: Monday 24<sup>th</sup> February 9am. Shortlisted applicants will be contacted on Tuesday 25<sup>th</sup> February and interviews will be held on Monday 2<sup>nd</sup> March.**

## Midlands Graduate School ESRC DTP

Our ESRC studentships cover fees and maintenance stipend and extensive support for research training, as well as research activity support grants. Support is available only to successful applicants who fulfil eligibility criteria. To check your eligibility, visit: [www.mgsdtp.ac.uk/studentships/eligibility/](http://www.mgsdtp.ac.uk/studentships/eligibility/)

Informal enquiries about the research or the School of Sociology and Social Policy prior to application can be directed to [alison.pilnick@nottingham.ac.uk](mailto:alison.pilnick@nottingham.ac.uk).