

BIOGRAPHICAL RESEARCH IN SOCIAL WORK

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Abstract: This paper looks at the possibilities of using biographical research in social work focusing on the elderly. Social work with the elderly uses or should use biographical data to create individual plans for clients or for the purpose of sensory activation. Narrative interviews are a form of interaction between a senior client and a social worker. The social worker supports the senior's narrative so they can view their life for themselves and explain its meaning from their own perspective. The use of sensory activation in social work is only possible when the individual's identity is supported by a sufficient amount of environmental stimuli, which can be achieved only by acquiring and analyzing data on the life events of the individual. The paper contains examples of the use of biographical data in social work with the elderly, which is essential for further structuring their lives.

Key words: biographical research; social work; senior; retirement home; sensory activation.

Introduction

One of the main characteristics of social work is that it aims to change and improve clients' lives (Björkenheim, 2014, pp. 104-105). Its emphasis on promoting the social functioning of clients lies in contrast to other fields and disciplines concerned with human activities (Matoušek, 2007). In her professional model of social work practice, Banks (2006) defines the social worker as an autonomous specialist with expert skills acquired through education, who retains considerable autonomy when working with clients and primarily adheres to the Code of Ethics for social workers. Looking at social work from the perspective of the professional, Musil (2008, p. 66) sees the social worker as a specialist who concentrates on making a comprehensive assessment of the diverse and particular circumstances that prevent the client from managing their interaction with the social environment.

A social worker who works in a retirement home requires knowledge of the biographical data required to create clients' individual plans or for social mobilization purposes, for example during sensory activation. Bennett (1983) describes the gathering of biographical data as an interview-based research process, in our case an interview between a senior and a social worker. Björkenheim (2014, pp. 104-105) points out that there is good justification for conducting biographical research in social work practice, particularly in relation to some social services users, although it has its limits.

Social worker's role in biographical research

Clark's theory of practical judgment holds that, as far as the social worker profession is concerned, empathy lies at the core of practical judgment, as do scientific and ethical standards. Clark (2007) considers the failure to carry out the role of social worker in accordance with scientific and ethical standards constitutes professional misconduct, whether it occurs through negligence, incompetence, ignorance or failed intention. Ignorance or incompetence, as well as a lack of empathy, generally prevent the social worker from carrying out biographical research to collect the necessary data on an elderly person's life. This may significantly affect the social functioning of the elderly in retirement homes. Richard (2004, p. 171) reports that one of the side effects of using the biographical method to obtain biographical data is that it constitutes informal therapy.

The aim of performing biographical research in social work is to determine how the elderly perceive certain events in their lives and what meanings they assign to them, so that the social worker can tailor social activities on that basis. Bertaux and Kohli (1984) state that in studying life events we gain access to the participant's perspective: their values, conceptualization of the situations and their own understanding of the social processes and rules that have resulted from their socialization and life experiences. It is not simply a "tedious" retelling of the past, but about linking the past with the present and the future, as the respondents tell their life stories or events from their current perspective, and about being able to assess the significance of the event differently from how it was assessed at the time it occurred (Clausen, 1998). This can be compared to Singer's concept (2004) of narrative identity.

Wilson et al. (2011) point out the importance of realizing that the difference between biographical research in social work and, for example psychology, lies in the fact that psychologists focus exclusively on psychological and relational problems, while social workers are supposed to focus on the client's—in this case an elderly person—potential to function socially. In social work practice, biographical research is also influenced by the relationship between the interviewer—the social worker—and the storyteller—the elderly person—, the institutional context and the narrator's capacity (Björkenheim, 2014, pp. 112-113).

When collecting biographical data obtained from the senior's narrative in direct interaction with the social worker, it is important to avoid asymmetry, where the social worker might direct the interview. Unrestricted autobiographical narrative is the only basis for quality biographical research (Schütze, 2008). That does not mean that the social worker does not ask the narrator—the senior—supplementary questions; on the contrary, this is an essential part of finding the necessary information. The answers give the social worker greater opportunity to delve into the autobiographical stories of the individuals (Rubilar, 2013). Asymmetry occurs when the social worker sees obtaining biographical data as a duty and puts themselves in the role of "clerk". Lipsky (1980) defines this behavior as a standard order oriented behavior, where the social worker simplifies common goals. Where social workers display limited creativity and an inclination to patronizing behavior, which manifests itself in interference with the elderly person's narrative, this is usually caused by fear of sanctions from their superiors for obtaining data that cannot be place in any of the

categories on the form (Keller, 2007). On the one hand, such behavior may be due to the pressure of organizations to reduce the risk of error; on the other hand, social workers may want to eliminate the feeling of uncertainty resulting from the individual assessment of the client's situation (Banks, 2006; Janebová, 2006). When using biographical research in social work, clients are in a more vulnerable position than in research situations where there is no relationship between the narrator and the researcher (Björkenheim, 2014, pp. 104-105).

In this paper we consider particular moments in biographical surveys carried out in retirement homes, which show how biographical data is used in social work with the elderly. The illustrative statements below were obtained through interviews with retirement home social workers who use biographical interviews. Five communication partners—social workers—were interviewed between November 2013 and February 2014 for investigative purposes.

Use of biographical interview in social work with retirement home clients

In qualitative research, investigating the life course means dealing with the life stories of individuals. As mentioned earlier, the aim is to record the lives of individuals and to find out how different people react differently or similarly to the same event and establish what meanings they assign to it (Šanderová & Šmídová, 2009). The aim is then to ascertain why there are transitions between different life stages at specific times, determine what impact certain experiences have on people and establish how people are affected by the turning points or major decisions in their lives. It is very important that the information is obtained directly from the individuals, who tell their life stories themselves (Šťastná, 2011). Life courses change over time so the study of life courses involves de-standardization (Brücknerová & Mayer, 2006). De-standardization is a consequence of the individualization process that has been going on since the second half of the 20th century. Nowadays life courses are much more flexible than they used to be. People have the opportunity to organize their lives according to their wishes (Hamplová et al., 2010).

In biographical research in social work where the emphasis is on the elderly, especially retirement home clients, the biographical interview is an irreplaceable tool for collecting data when the individual activation plan is being created. People may talk about their own lives in order to pursue the following objectives: to provide a motto for their lives, to take themselves seriously, to deal with the sharp corners and edges of their lives, to process their lives and to learn to understand crisis and look for clues left behind by a person, to become reconciled and accept themselves as they are (Specht-Tomann, 2012).

Getting to know the senior's social curriculum vitae enables the social worker to collect facts in the client's natural social environment so that a high quality of life can be maintained as long as possible, ideally until the end. The biographical interview, as discussed in Vojtová (2014, p. 9), makes it possible to obtain a comprehensive view of the client, including biological (physical), psychological (mental) and transcendental (surpassing - spiritual) areas. An integral approach therefore cannot ignore any of these areas because omitting one might lead to distortions in another. It is therefore not possible to focus on a single isolated area. A biographical interview can be successfully used with retirement home clients who are of sound mind and also with those who suffer from dementia. It helps to bridge the adaptation phase, which is often very difficult. Sometimes people who are advanced in age have to

move to a retirement home, leaving behind their natural home, the place where they spent a major part of their life, the place where they lived with their partner and children. They have to leave behind many things and memories. When they move to a retirement home their life suddenly shrinks to fill two suitcases, but this is no way for anyone to move, this is how people travel on holiday expecting to come back. If the individual has finally opted for a retirement home, we should not let him or her cherish the hope of returning “home” (Vojtová, 2014, p. 64). Our starting point is the assumption that adaptation does not only involve passively adjusting to the environment, but also the environment has to adapt to the needs of the individual. The relationship between the individual and the environment is about meeting the person’s needs. It is true that it is difficult to estimate the adaptation process in advance; what is crucial is the individual’s interactions with the environment, their vitality and health status, economic security and the norms and expectations of the society. The individual’s personality throughout their life course is also very important for adaptation to old age, because human life involves continuity (Pacovský, 1994). As noted by social workers, it is during the adaptation phase that the biographical narrative is often used for the first time.

In the majority of cases clients are very willing to talk about their lives, describing the individual events relevant and important to them at that time. The survey results clearly show that the vast preponderance of these events are considered as resolved by the clients. The interview also makes it possible to discuss factors relating to fear of the unknown often accompanied by anxiety. The interest shown in their biography makes the client feel that the new environment is “adapting” to his or her needs as well, and that he or she is not the only one who has to change.

Social worker:

For example, Mrs. J. states that she is very glad she can do gardening here too [the retirement home has a garden therapy program]. They always had a garden at home. She really enjoys feeling the soil in her hands and loves the smell, especially in the spring.

The biographical interview plays an important role in the treatment of clients with dementia. Although at first glance it may seem impossible or difficult to use this technique with this target group because of their reduced communication capabilities, in fact this is not the case. The social worker encourages the client to communicate through a system of sensitive, empathic questions and they “work” together to reproduce the client’s life story. The client’s orientation in time and space is reinforced and particular moments which lead to involvement in plan activation techniques are found. Creating the biographical narrative promotes client autonomy and decision-making. By creating the biographical narrative, working with photographic material has also proved successful.

Social worker:

When working with photographs, clients reflect on their family. We often manage to uncover stories that are crucial for the client and help to bring a sense of peace in relation to the particular situation or person. In clients with first degree dementia, long-term memory is impaired but the feelings and impressions often remain. One example for all: During a biographical narrative using photographs, Mrs. A. and I discovered the complex relationship that she had had with her sister - she cried at the memory and did not discuss the problem. From my position it was essential not to be judgmental.

As is apparent, biographical interviews are used repeatedly in retirement homes and, especially where clients with dementia are concerned, they help reveal the client's personal stories and thus create opportunities to establish an individual sensory activation plan.

The conversation is always geared towards the individual and the mood the client is in. It is essential to "tune the client into" the conversation, to steer them slowly and subtly towards the topic which might complete the missing moments in their biography. Categories that could be used in therapy for maintaining and improving the elderly person's competencies are monitored. Often the biographical interview reveals issues that may contribute to understanding the client's life story; though at first they may not produce a positive response.

Social worker:

In the past it was customary to provide various activities for the clients universally. Sometimes an activity was rejected by the client for no apparent reason. Experiences with the biographical interview mean that the activities are now being set up individually. We were talking with a client, Mr. D., about his life, he was withdrawn, uncommunicative and I suggested doing some woodwork, as he had liked this in the past. I began handcrafting a catapult. Mr. D., however, was very upset and rejected this activity. Nevertheless, this experience was a real asset – as we found out from it that as a child he had witnessed a tragic event in his family, which had happened as a result of playing with a catapult. Suddenly it was easier for the client to talk about the event which he had locked away previously. The client's negative reaction resulted in a very good outcome in the end.

Similarly, the universalistic approach to providing pastimes for clients has not proved successful—for example, a home may offer canine therapy, but it may not be suitable for everyone. Clients with dementia in particular may experience a negative reaction and withdraw into themselves, and if the encounter with the animal is associated with a negative experience, the outcome is not therapy but rather the opposite. Social workers often try to make the client understand and communicate, instead of trying to understand the client. Therefore, the above described reaction is then considered as "resisting care" or "non-cooperation". With time and the pressure of circumstances the client is then forced to conform and become lethargic and languish. Situations such as these are eliminated in practice when the biographical interview is used.

Social worker:

Mrs. B. is a simple country woman. We know from her biography that she used to get up at dawn and take care of the household, the children and her husband, and work in the woods. She used to do sewing and knitting as craft activities. The question is how and why should this woman be forced to do activities such as pottery making. She has never done anything like that in her life before. It is understandable that she would not enjoy this activity.

Another misinterpreted area may also be client aggression, which is often associated with dementia. It may then be assessed as a manifestation of dementia with no consideration of whether it might not instead be a manifestation of the client's will, especially where there is limited verbal ability. A social worker states:

At the beginning of her stay in the institution Mrs. S. could not get on with her roommate and behaved aggressively. A biographical interview implemented in several stages revealed that

the problem was not the roommate, but her relative untidiness. The client was just not capable of verbalizing the problem satisfactorily. Mrs. S. had been a perfectionist all her life, she liked things in their place, in a particular order. With insight into the root of the problem, the aggression disappeared.

Conclusion

Our contribution aims to show some examples of how the biographical interview can be used to help set up a client's individual sensory activation and to maintain the competencies of a senior. Retirement home social workers often intuitively carry out part of the biographical investigation, but due to the lack of a policy and one could say awareness of the effectiveness of this approach, they do not pay particular attention to it. The biographical interview presented in this paper is part of the biographical care that should become a permanent part of the social work methodology used in interaction with the elderly. Biographical care in various institutions is often reduced to an entry interview or to filling out a biographical form (cf. Keller, 2007; Banks, 2006; Janebová, 2006). However, life stories are essential in social work with the elderly.

In conducting biographical research in elderly care it is important to realize that there should be repeated access to the client and that we should seek out the points and moments in their life which provide material that can later be used for activation; we should ponder on these and consult them with our colleagues. Then we can gently, sensitively and effectively set up a sensory activation plan, for example, or an individual care plan for a specific client. As stated by Vojtová (2014), when care focuses only on the body, i.e. ensuring that the person has eaten and been washed, and that medical and nursing care have been appropriately set up, it is not sufficient and does not make them feel happy. If the care does not provide mental and emotional support and lacks sufficient sensory stimuli, something will still be lacking and the senior's physical condition will not be satisfactory despite the highest quality of medical care and treatment. We must not neglect the spiritual area, which is part of many people's lives. These three parts operate closely together creating a nexus in space (where and how we have lived or are living) and time (in what time we lived and in what time we are living in). When we take the context of "space", the environment where the person grew up and lived as well as the environment where they are living currently are at the centre of nursing interest. We look for answers to these questions: Did they live in the country or in the city? Did they live in a small flat or in a house with a garden? Is the environment in the retirement home suitable, or should it be modified? When we consider "time", it is in the context of the past, present and future. A social worker can obtain the necessary coherence and depth of information only through the use of biographical interviews.

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