

Institution: University of Warwick		
Unit of Assessment: D27 – English Language and Literature		
Title of case study: Ageing as Embodied Time: Using Literature to Understand and Improve Wellbeing in Older Age		
Period when the underpinning research was undertaken: 2012-2020		
Details of staff conducting the underpinning research from the submitting unit:		
Name(s):	Role(s) (e.g. job title):	Period(s) employed by submitting HEI:
Elizabeth Barry	Associate Professor (Reader)	October 2001 – present
Period when the claimed impact occurred: March 2014—July 2020		
Is this case study continued from a case study submitted in 2014? N		
1. Summary of the impact (indicative maximum 100 words) <p>Barry's research in the field of Medical Humanities influences and informs the practice of healthcare professionals working in geriatrics. Using insights gained from her expertise in modernist literature, Barry's research sheds light on subjective experiences of ageing and time, and explores how these can enhance patient care. Through collaborations with psychologists, psychiatrists and geriatricians, and via workshops and training sessions, Barry is shaping and changing approaches to clinical research, practice and teaching, thereby improving patient care for older people.</p>		
2. Underpinning research (indicative maximum 500 words) <p>Through her work on ageing and mental health, Barry has been involved in shaping the emergence of 'critical medical humanities' in the UK context, and age studies in the international field. Her research concentrates on representations of subjective experiences of older age, dementia and mental health in literature and phenomenological philosophy. Barry's first AHRC funded project focused on experiences of consciousness, mental illness and time in drama and literature of the early twentieth century. Her second explored ageing and end of life in relation to modernist literature and current narrative medicine. This work has been extended through a Norwegian Research Council grant to support collaborations with philosophers, anthropologists, doctors and social workers about ageing, dementia and the experience of time in these conditions (i.e. memory, finitude, end of life).</p> <p>Since 2012, Barry's research has focused on the way attention to time and subjective experience can unlock experiences of ageing and mental disorders. Her work in developing a new 'practical phenomenology' increases understanding of the individual experience of older age and chronic mental illness, and has been disseminated via conferences and workshops attended by healthcare professionals. This work has also been shared beyond the academic sphere at professional meetings for clinicians at hospitals and medical conferences in the UK and US.</p> <p>Barry's research is published in the fields of medical humanities, psychiatry, medical education and literary studies, as evidenced in several articles on time and health (3.1; 3.2; 3.3). She has edited a special issue of the international <i>Journal of Medical Humanities</i> (Springer) on Beckett and Medicine (3.4). She has also contributed to training for healthcare professionals through publishing on medical education in the BMJ journal <i>Medical Humanities</i> (3.5), and on Beckett and psychiatry in the <i>British Journal of Psychiatry</i>. She gave a paper on dementia, memory, identity and time at <i>The Social Life of Time</i> event in 2018, an interdisciplinary conference attended by healthcare professionals and a range of scholars, and a paper on frailty, care and</p>		

ageing at the *Crisis and Chronicity* conference in New Jersey in 2019, a similarly interdisciplinary medical humanities event with healthcare professionals in attendance.

Barry's findings highlight the way in which attitudes towards finitude, contingency and slowness change with bodily frailty and immobility and how these subsequently bear on the way in which older people are treated and cared for. Her research into the experiences of time indicates the importance of listening and communicating with older people beyond a task-based organisation of time. She identifies ways to look for signs of agency and communication where they may not be immediately apparent and has demonstrated the importance of humour to interaction. Her findings suggest using techniques such as clowning, mirroring, and non-propositional wordplay to improve communication with people with advanced dementia (3.1; 3.2).

Barry has analysed the impact of the loss of expectation created by memory loss in dementia. This affects planning, motivation and the sense of purpose essential to self, bringing enormous anxiety and uncertainty. It robs the capacity for surprise as well as the ability to sustain habits and feel any grounding familiarity. This occurs on top of the loss of a sense of self and the damage to relationships that the loss of memory entails (3.3).

Barry's work challenges the idea that personhood is defined by the ability to offer a coherent narrative of oneself over time, or to maintain stable critical interests. She argues instead for the importance of the capacity to retain meaningful interests, to communicate, and most significantly to value and express values, as well as to be creative and to play, even in advanced dementia when propositional speech is lost or damaged. Her research recognizes embodied and social forms of knowledge which are embedded and survive the loss of language. Her observations on all of the above have informed policy on the delivery of care, and decisions about treatment and the end of life (3.3).

3. References to the research (indicative maximum of six references)

Barry's publications include articles in peer-reviewed journals and chapters in edited collections, one of which she co-edited:

1. **Barry, Elizabeth** (2016) *The Ageing Body*. In: Hillman, David and Maude, Ulrika (eds.) *The Cambridge Companion to the Body in Literature*. Cambridge: Cambridge University Press, pp. 132-148. doi:10.1017/CCO9781107256668.010
2. **Barry, Elizabeth** (2016) *Samuel Beckett and the Contingency of Old Age*. *Samuel Beckett Today / Aujourd'hui*, 28 (2). pp. 205-217. doi:10.1163/18757405-02802007
3. **Barry, Elizabeth** (2020) *Critical Interests and Critical Endings: Dementia, Personhood and End of Life in Matthew Thomas's We Are Not Ourselves*. In: **Barry, Elizabeth** and Vibe Skagen, Margery (eds.) *Essays and Studies* (Vol. 73): Literature and Ageing. Woodbridge: Boydell and Brewer, pp. 129-148. ISBN: 9781843845713
4. **Barry, Elizabeth**, Maude, Ulrika and Salisbury, Laura (2016) *Introduction – Beckett, Medicine and the Brain*. *Journal of Medical Humanities*, 37 (2). pp. 127-135. doi:10.1007/s10912-016-9383-7
5. Heron, Jonathan, **Barry, Elizabeth**, Duncan, Francesca, Hawkins, Elaine and Playdon, Zoe (2016) *'Beckett on the Wards': Medical Humanities Pedagogy and Compassionate Care*. *Medical Humanities*, 42. Pp. 63-64. doi:10.1136/medhum-2015-010772

Grants:

AHRC (Ref: AH/J01138X/1) Beckett and Brain Science, Feb 2012 - Sep 2012, **GBP16,322**.
Awarded to: Elizabeth Barry (University of Warwick, PI), Ulrika Maude and Laura Salisbury.

AHRC (Ref: AH/M006883/1) Modernism, Medicine and the Embodied Mind: Investigating Disorders of the Self, Feb 2015 - Sep 2016, **GBP35,953**. Awarded to: Ulrika Maude (University of Bristol, PI), **Elizabeth Barry** and Laura Salisbury.

Research Council of Norway (Programme for Cultural Conditions Underlying Social Change (SAMKUL)) (Ref: 259163) Historicizing the ageing self: Literature, medicine, psychology, law, 2016-2021, Total award amount: **NOK8,900,000** (10-2016) (NOK100,000 to **Barry**). Awarded to: Margery Vibe Skagen (University of Bergen). *This research programme is particularly concerned with generating new knowledge to tackle social challenges from a cultural perspective.*

4. Details of the impact (indicative maximum 750 words)

Across the healthcare sector, and in Geriatrics in particular, there is a push towards a model of care which places the individual's holistic needs at the centre, to complement the traditional medical model. The field of medical humanities offers interdisciplinary perspectives to understanding what health and wellbeing means to individuals and communities. Barry's research is shaping this field by directly informing healthcare professionals' understanding of patients' subjective experience of time and ageing. Particularly significant for dementia patients, Barry's approach is unique in bringing insights on personhood and subjective experiences from modernist literature to bear on professional practice to help practitioners better understand their patients and their conditions.

Training and Workshops for Healthcare Professionals

Barry has shared her research with doctors, psychiatrists and psychologists at events held at the University of Warwick (2016, 2018); University of Bergen (2016); the Institute of Psychiatry in London (2014); the annual meetings of the International Association of Gerontology and Geriatrics (Gothenburg 2019), and the British Geriatrics Society, the professional body of geriatric medicine and healthcare (Leicester 2019). Additionally, Barry organized and spoke at events at Warwick (March 2015, October 2017, June 2018), Exeter (April 2015), Bristol (July 2016) and Leicester (November 2019) involving doctors, neuropsychologists, neuroscientists and psychiatrists (approximately 200 total attendees across all events). These provided Barry a platform to share the ways in which her research into the concept of time (experience of time in ageing, mental illness, care) can improve understandings of patient experience. In September 2015, Barry co-organized and spoke about ageing, modernism and psychoanalysis at a symposium at the New York Institute of Psychoanalysis. This was attended by 114 analysts and psychotherapists, and parts of the event were accredited as Continuing Professional Development. One attendee commented that 'very often we isolate the knowledge of psychoanalysis and clinical knowledge from the larger cultural context, so it was a treat to hear presentations that helped to broaden the perspective' (5.1). Another commented that following the symposium they intended 'to broaden my play therapy style with patients' (5.1). Barry also delivered a session at the Mount Sinai Hospital in New York to approximately 20 therapists and psychiatrists on Samuel Beckett, temporality and mental disorder (September 2015). Through Barry's research insights and training, future patients receiving psychotherapy will benefit from enhanced treatment and care from their clinicians, through an enhanced understanding and deeper empathy of their subjective experience of mental disorder.

In July 2018 the Norwegian Research Council funded Barry to organize the 'Living a Good life in Older Age' symposium at Warwick, involving clinicians, medical ethicists, psychiatrists, geriatricians, sociologists, librarians, chaplains and those in the charity sector (Campaign to End Loneliness). A Professor of Old Age Psychiatry at the University of Bristol reflected that attending sessions run by Barry in the 'Living a Good Life in Older Age' symposium convinced him that the 'ways we represent dementia must continuously be challenged and seen from different or at least broader perspectives'. He reported changing his thinking on issues such as sleep deprivation and isolation in old age, both of which he newly saw as political and human rights issues (5.2). The talks were also made publically available on YouTube, and have had a combined total of 1,404 views as of 04.08.2020 (5.3).

Barry was asked on the strength of 'Living a Good Life in Older Age' to run a programme of arts events for the British Geriatric Society Fringe (BGS Fringe) to offer alternative humanities-based perspectives on older age care at the British Geriatrics Society 2019 Autumn Meeting, attended by approximately 3,000 geriatricians and healthcare professionals. In feedback from Barry's talk on Parkinson's disease and theatre, all respondents indicated that they 'agree' or 'strongly agree' that they understand the experiences of their patients with Parkinson's disease better and understand more about how those with Parkinson's experience time. All but one agreed or strongly agreed that they have a better sense of how society perceives those with Parkinson's (the one exception was 'neutral' on this point) (5.4). The feedback indicated a greater awareness of the psychology of those with Parkinson's, including 'an increased awareness of mood and apathy' and the impact of 'physical effects on emotional expression'; and found it to have made 'excellent points on the effect of overcoming... stigma'. The 'fascinating' talk on the emotional experience of Parkinson's will, one said, 'relate to my patients in clinics' (5.4). Two-thirds of those that attended the BGS Fringe programme felt that they had a new perspective on aspects of their work, and two-thirds strongly agreed or agreed that they had 'thought more about how society sees older age' (5.5).

Working with Healthcare Professionals to Improve Patient Care

Through long-term collaborations, Barry has worked closely with a number of healthcare professionals, including those involved in teaching, to deepen their understanding of patients' subjective experiences of mental health, ageing and cognitive decline.

Professor Femi Oyebode, Consultant Psychiatrist and Professor of Psychiatry, has attended events run by Barry and has a continuing interest in her work. He attended Barry's workshop on Empathy and Affect in Medical and Theatrical Practice (2017) focussing on patients with facial paralysis. Prof Oyebode said that the workshop's insights on how people respond to people with this kind of paralysis 'influences how we monitor our own responses to depressed patients, for example, and how we must ensure that we avoid the natural distancing that this natural response might cause'. Prof Oyebode also commented on how Barry's teaching on her 'The Medical Mind' module influenced his practice with regard to the use of language, in particular how Sarah Kane's *Psychosis 4:48* 'forces medical practitioners to confront how they may be perceived by patients and how their language use may itself be a source of disquiet for the patient. These insights have been immensely valuable for my clinical work' (5.6).

Clinical psychologist Professor Inger Hilde Nordhus, a research partner in *Historicizing the Ageing Self*, stated that 'in close collaboration with Elizabeth Barry, new perspectives on my own work – as a clinical researcher and supervisor have been developed. We share, in particular a devoted conversation on dementia and personhood as well as on loneliness and solitude in old age. From these conversations, I can bring new views on these issues to my students, graduate candidates and postdocs. Eventually they bring these perspectives into their own clinically relevant work' (5.7).

Dr Joanne Preston, Consultant and Care Group Lead for Senior Health at St George's University Hospitals, attended and spoke at the 'Living a Good Life in Older Age' symposium in July 2018. Subsequent collaborations with Barry have influenced the way Preston has approached her own practice. Preston described the symposium as 'nourishing and refreshing', and that 'unlike the psychology and social science explanations of ageing I had learned about in my masters, it felt more tangible to the experience of working with older adults day to day'. Following the BGS Fringe, which Dr Preston attended, she felt that 'it allowed people the space to explore and think in and amongst the usual scientific talks. Geriatrics in particular needs this as a balance to the "learning facts and keeping up to date" side of the job, because it is a particularly holistic specialty aiming to support people to live life as independently as possible, in line with the goals for their lives' (5.8).

Academic Psychiatrist Professor Matthew Broome has also collaborated with Barry to examine how literature can relate to clinical practice. Barry's ideas about modernist literature, and Beckett

in particular, have developed Broome's clinical practice: 'Frequently, medical students and doctors have a conception of illness that is time-limited, where treatment is successful, and where full recovery occurs. Having these assumptions challenged, and being able to reflect upon them, has developed me as a clinician, researcher and teacher and I hope similarly improved the undergraduate, postgraduate and professional training I deliver. It is the ambiguities of clinical practice where clinicians feel most stressed and where burnout may occur: I believe the approach you have taken in your work may help alleviate this and hence support the clinical workforce and, in turn, our patients' (5.9).

5. Sources to corroborate the impact (indicative maximum of 10 references)

1. Feedback from New York Psychoanalytic Society and Institute
2. Statement from Professor of Old Age Psychiatry, University of Bristol
3. Youtube videos viewing numbers
4. Feedback on Barry's talk at the British Geriatric Society Fringe
5. Feedback on the British Geriatric Society Fringe
6. Statement from Professor Femi Oyebode, Consultant Psychiatrist and Professor of Psychiatry, University of Birmingham
7. Statement from Professor Inger Hilde Nordhus, Professor of Clinical Psychology, University of Bergen
8. Statement from Dr Joanne Preston, Consultant and Care Group Lead for Senior Health, St George's University Hospital NHSFT
9. Statement from Professor Matthew Broome, Chair in Psychiatry and Youth Mental Health and Director of the Institute for Mental Health, University of Birmingham