Thinking from experience in psychosocial practice: reclaiming and teaching 'use of self'.

Abstract

A course based on psychosocial theory and students' experiences in practice has been taught in the UK, Norway and Quebec. It departs from the classical social work concept 'use of self' and aims to help novices in health and social work to understand how the social world is internalised and re-produced and the value of thinking from experience. International developments such as, competency-based education, New Public Management and evidence-based practice reduce opportunities for experiential learning. This trend has been exacerbated by a focus on anti-oppressive practice without a corresponding understanding of how oppressive relations are internalized and enacted by defended and conflicted subjects. Attempts to rectify a relational deficit through traditions of reflective practice and critical reflection are important developments, but could be further strengthened by psychosocial and psychodynamic perspectives. The course combines critical, contextual and relational thinking for students in caring professions.

Keywords: learning from experience; relational; psychodynamic; psychosocial; critical

Introduction

This article explores rationale, content, delivery and assessment in a course exploring use of self that is offered primarily to social work students in the UK and Quebec, and students of social work and health professions in Norway. The course

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has conceptual and experiential components and its purpose is to enable students to learn and think from experience (Bion 1962) while making use of theoretical precepts to support such thinking. We begin by bringing to mind the emotional impact of work in the caring professions by presenting an extract of a Norwegian student's account of a suicide where she worked, written in her assignment in the form of a letter to the dead woman.

The boss sent me to a psychologist when you took your own life. I asked to be put on the observation unit after that. I couldn't bear to go into your room on the open unit because it had become your room. You had been there so long, too long. We felt it was enough – you needed to get out. You also thought it was enough so you left in your own way. With the help of the tablets, as so often before, but this time you had decided not to come back. I am still thinking of you, Tine, quite often. Your grave is so nicely decorated. I have been there.

In this way Berit begins with an inner dialogue with Tine, a patient who killed herself. She interweaves her own story of becoming a professional with this conversation. A great deal is implicit in this opening paragraph: an institution that recognises the distress of staff, but cannot contain it, so that it becomes personalised; the relationship between private feeling and professional distance; protecting oneself against the unbearable by evasion; being haunted; grieving and the ambiguity of "I have been there".

In the essay, Berit goes on to discuss difficulties she has encountered in her professional development, doubts about whether she was suited to the job, and her efforts to establish boundaries so that she would be neither invaded by the work nor defended against it. She speaks of her anger against the patients in the face of her intention to care; feelings of aggression, childishness and the difficulty of knowing where to locate responsibility. In her writing she enacts the struggle:

Another patient managed to strangle herself while I was on the observation unit. She was throwing up blood. How many bags have I pulled off heads? How many ropes have I cut off necks? How many cuts have I stuck together? How much blood have I seen? My life has been threatened, I've been spat on, I've been told how ugly I am and how incapable. I have been so angry with so many of these patients. Why are they doing this to me? I just want to help. Do they know how exhausting it is to look in on them, unsure whether they're alive? And who will be responsible if they die? The patients exploit my care.

The 'experience near' quality of Berit's writing conveys her near despair; her feeling of having become the victim of her patients; her sense of grievance that her best intentions have been abused; and the exhaustion of her capacity to care. If her essay had ended here it would have been at a point where she could no longer stay in touch with her patients and their pain. Berit later realizes that she needed to see the vulnerability in her patient in order to care, but she first needed to acknowledge it within herself and have it contained. She tells of how she found such a container in supervision, and demonstrates that she has developed an internal container in the

way she thinks and writes about what has happened. She arrives at a point where she has a realistic sense of her own responsibility - without defensiveness - but also without paralysing guilt. She has learnt to think both from and about experience

You didn't make it. I didn't save you. But you have through your life and your death taught me about what I can do differently. I should have done something different. However you should have done things differently too. It was not my fault that you died.'

Berit demonstrates an active 'use of self' as an effective medium of intervention. In her case it involves accommodating complexity and ambivalence, recognizing her own defensive behaviour, its institutional context and the social conditions within which it acquires meaning. All this is a precursor to reflective and responsible professional judgment. She tells a story of a professional journey which involves theoretical, practical and emotional learning.

Reclaiming use of self: Rationale and outline of this article

In this article we argue that an ability to use the self effectively in practice requires context-rich applied psychoanalytical thinking of the type that has been developed within professional relationship-based practice (Trevithick 2003, 2012, Ruch et al 2010, McClean and Frost 2011). This can sustain complex, ambivalent reactions to situations which incite manic hope, unreasonable despair, traumatised inaction or overt aggression, not to mention the chains of identification and disavowal to which

helping professionals may be prone in the course of an ordinary working day. In the UK approaches, premised on the conflicted or defended subjectivity of both helper and helped, are supported by Psychosocial Studies http://www.psychosocial-studies-association.org/ which has helped to diffuse applied psychoanalytic thinking beyond the clinical encounter towards communities, institutions, and the public sphere. It has produced a stream of research and scholarship (Hoggett 2000, Hollway 2001, Froggett 2002, Cooper and Lousada 2005, Ferguson 2005, Stenner et al 2008, Frost 2008, Maclean and Frost 2011, Walkerdine 2008, Ramvi and Davies 2010). Much of this work is methodologically useful for practitioner-based and practice-near research (Froggett and Briggs 2012, Hingley 2009, Hollway 2009, Nicholson2009, Froggett and Hollway 2010, Hollway and Froggett 2012, Ferguson 2010) offering students alternatives to positivist evidence based practice.

It is because our students need critical contextual awareness *and* understanding of intersubjective relations at the practice interface that the classical social work concept 'use of self' (Wosket 1999, Rowan 2002, Ward 2010a, Baldwin 2013) is useful. Parton and Byrne (2000) argued some time ago that while 'use of self', was formative within the development of social work as a profession, the psychodynamic theory on which it rested (for example Preston-Shoot and Agass 1990) had lost purchase by the 1980's. A constructivist way forward would henceforth be supported by 'the linguistic turn' in the social sciences (Adams 2002). In rehabilitating use of self we are responding to material changes in professional helping over the last thirty years or so: re-structuring of professional education around competency assessment and a new research-based evidentialism. We

consider these developments have insufficiently supported the relational foundations of the work. With the research-mindedness that is now advocated use of self should become an object of research as well as clinical inquiry. This would help develop practice-near research strategies better adapted to the situated helping of the relational professions than a positivist or practice-distant evidence base (Froggett and Briggs 2012). We contend that students need to think *from* experience with concepts which help them think *about* experience.

Before outlining how the course facilitates such learning we will highlight key developments in health and social welfare which have reduced space for it within the curriculum: new public management, competence based learning, evidence based practice. These developments reflect global processes of marketization, managerialisation and proceduralisation of state welfare, to which the UK, Quebec and Norway have accommodated through nationally specific health and welfare systems. These trends have impacted on professional education and make it both urgent and difficult for students and novices to achieve a reflexive understanding of the personal in the professional.

Anti-oppressive theory (AOP - see for example Dominelli 1997) developed in the nineties (more strongly in social work than in health) largely replacing a Marxist-influenced Radical Social Work which was at the height of its vigour in the 70's (Bailey and Brake, 1975, Jones 1983, Jones and Novak 1999, Ferguson et al 2002). A key strength of AOP was in drawing attention to the multiplicity of oppressed subject positions beyond, but often intersecting with, poverty and class. It has been able to

incorporate critiques from feminism and ethnic minority voices while still sometimes tending towards a structural determinism, especially in the hands of inexperienced students unfamiliar with the many strategies oppressed groups adopt to escape apparently crushing material circumstances. On the other hand, social constructionism and post-modern theory (see Fawcett and Featherstone 1995, Parton 2002, 2009 Parton and O'Byrne 2000) can sometimes give students the impression that material disadvantage is a by-product of the narrative self or misconceived lifestyle choice. We argue with Frost (2008) that despite efforts to escape structural or linguistic determinism these theoretical orientations have some limitations in practical use: although averting dualisms and determinisms is a sound principle – the practitioner arguably needs an operational understanding of why in certain situations the mental propensity to split, that produces dualistic thinking, becomes overwhelming. They also need a means of accessing and supporting the reparative states of mind which forestall polarised reactions (Foster 2001). We draw attention to other important attempts to preserve complex, experience near, critical thinking and professional judgment through reflective practice (Schön 1983), and a vigorous strand of work on critical reflection (Fook 2002, Fook et al 2006) that has further developed the practice implications of social constructionist perspectives.

New Public Management and Economic Rationality

Of the three national contexts in which our program has been introduced, UK health and welfare services have been through the most far-reaching processes of re-structuring, beginning with the introduction of New Public Management in the 1990's (Clarke et al 2000) and a continuing demonization of welfare dependency

(Froggett 2002, Cooper 2010). New Public management introduced pseudo-market structures and management priorities into public service organisations, along with the economistic priorities of efficiency, effectiveness and economy, target driven processes and outcome measurement. This appears to be an unstoppable trend, at least within western societies (Lian 2007, Christensen and Lægreid 2011). . It has even occurred in Norway where public support for generous welfare provision remains high (Bergh and Bjørnskov 2011). 'The Nordic welfare model' (Esping-Andersen 2006; Hagen and Schroyen 2009) has given way to increasing individualisation and a 'new realism' (Åhlund and Schierup in Rugkåsa 2011), premised on carefully calibrated entitlements and the reciprocity of rights and obligations. There has been a general trend towards proceduralisation and managerially driven re-structuring of work processes, contracting of services to the voluntary and private sectors, and re-positioning of the clients or patients as service users or consumers (Deber et al 2005, McGlaughlin 2009, Lian 2008, Vetlesen 2010).

These processes are also well underway in Quebec and Canada and have been documented by social work scholars across the country in the last decade (Armstrong et al 2008, Graham et al 2011, Davies and Leonard 2004, White 1999). In Quebec, the increasingly regulatory orientation of the Social Work Professional Order is evident in the narrow focus on detailing and measuring competencies. This has led to a struggle between universities and professions for control over direction of professional education. Social work students report the near absence of clinical supervision in the field and their struggles in its absence (see Kadushin and Harkness 2002).

In all three contexts discursive shifts in health and welfare indicate profound changes in how we speak and think so that reflexive use of self in role appears irrelevant in the face of other priorities: students learn to '*produce'* health, 'perform' service, 'quality assure' work, 'assess risk', 'give value for money', 'implement quotas' and 'manage' waiting lists. They must also manage themselves in the face of technical-rational and politically driven imperatives. A reflexive use of self counters 'splitting' of the relational and technical-rational self, disabling students from working realistically within and challenging managerial parameters when they impinge upon the relational core of the work.

Shortcomings of Competency based education

The assessment of professional competencies has occurred parallel with and linked to managerialisation. It has transformed professional education emphasising its performative dimensions (Dominelli 1996, Froggett and Sapey 1997, Clarke et al 2000). Competence measurement (in symmetry with outcome measurement in services) has generated increasingly formulaic learning as students struggle to shoehorn the ambiguous experiences of practice and their ambivalent feelings about it into demonstrable skills appropriate to routinized and risk averse settings[1]. Professional judgement is seen as diminished in relevance and the capacities required to develop it are often neglected. 'Practical realism' (Rugkåsa 2011) can mean ignoring relational processes, compromising an ethic of care. Mismatches ensue between practitioners' expectations of what 'helping' might be and the highly

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[1] Website of the Ordre professionnel des travailleurs sociaux du Quebec. Http://www.optsq.org

regulated environment. 'Realism' can quickly lead to cynicism, alienation and loss of agency if the dissonance between the desire to care and systemic imperatives is not addressed at both a cognitive and emotional levels.

Drawbacks of Anti-oppressive theory

Early arguments for anti-oppressive practice (AOP) in the UK stressed the role of social work practice in adjusting power relations in favor of the disadvantaged, as well as its critique of oppressive institutions and social relations (Dominelli 2002). However, McGloughlin (2005) identified this perspective as reflecting 'a politics of failure' in a context where neo-liberalisation of welfare services had usurped any radical egalitarian vision of social justice. In a recent critical review Rush and Keenan (2013) argue that the limitations of AOP in its own terms (its emancipatory intent) has to be understood in terms of the residualisation of welfare in neo-liberal welfare regimes. Social work is effectively hived off from other universal public service professions (such as nurses and teachers) and becomes pre-eminently an occupation concerned with the regulation of the socially and economically excluded and those defined as 'undeserving' or 'deficient'. This situation is contrasted with the still relatively universalistic conception of welfare professionals in the Nordic model, which provides for a common basic curriculum in the initial stages of health and welfare training. This accounts for a greater pre-occupation with AOP advocacy in Anglophone countries, however the ethical and political formation of care professionals in the UK, Canada and Norway still shares a common characteristic: a thin and insubstantial view of the welfare subject in which there is 'no proper theory of internalisation' (Hoggett 2008, p. 7) and hence no effective understanding of how

structures of oppression are internalized differently in residualised and universalistic welfare systems. Meanwhile we observe difficulties in conceiving of a practice in which emotional responsiveness and political literacy are intertwined. In consigning views of welfare subjects with psychological depth to a casework tradition which has been caricatured as individualizing and apolitical, AOP has unwittingly promoted an overly intellectualised and ideologically driven academic curriculum; 'experience' becomes synonymous with the positional experience of the service user in terms of class, race, gender and so on, rather than that of 'a loving and hating subject with an internal world that comprises real and imagined relations' (Hoggett 2008, p.70). In this situation the student professional struggles to attend to the experience of the other and the specific quality of distress. The impulsion towards advocacy is then characterised by an excited moral outrage rather than a complex psychopolitical appraisal of both internal and external sources of oppression. Despite an overt emphasis on the experience or service users, AOP can be used as substitute for thinking from experience on the part of the professional, and can even be used as a social defense against anxiety when confronted with someone experienced as 'other' and the vulnerability entailed by entering into relationships with them (Ramvi 2011). At worst, students have been denunciated for being sexist, racist, or guilty of some other pejorative 'ism' from the student body itself. A 'regime of shame' is then produced and fear of not occupying the correct position paralyses thought and self-expression. Although far from its original intent, a one-sided focus on AOP may well have stifled the development of social work and nursing theory leading to simplified, formulaic thinking rather than attempts to grasp the complexity of case-based professional judgment. It has also run counter to a case-based reflexivity in which

the professional can acknowledge herself as a defended, sometimes prejudiced, and always dispositionally influenced, part of the case scenario.

Evidence based practice

It has been argued that professional judgement has also been downgraded with the arrival of evidence-based practice (Martinsen 2005). For students this may have compounded the difficulty in finding frameworks for thinking about the personal impact of practice situations. Martinsen claims that we live in an epoch that over-emphasises scientific and technological solutions to problems where knowledge is located in a hierarchy of evidence and that evidence has become a totalising concept. The world-wide trend of EBP privileges models of 'best practice' based on supposedly objective knowledge. Martinsen (in Martinsen and Eriksson 2009) claims that it has acquired ideological overtones and that the term has now become a form of rhetoric.

The 'evidentialism' of EBP rests on scientific reductionism. Law and MacDermid (2008) argue that it has shifted the balance away from the apprehension of complexity on which professional judgment is based. Instead, there is an emphasis on risk management (McGloughlin 2007) and forensic aspects of assessment. If practitioners are to integrate research based knowledge into their understanding of professional processes, they need to understand both the strength and the limits of this kind of evidence and the fact that it will not substitute for thinking.

Students training in relational professions need to understand what counts as evidence in the practice situation, how to use a developing research base and how to identify research-based studies which are congruent with the methods and concerns of practice. It is important to counter a tendency to polarisation between the kind of learning that could be expected within the practice placements and within the classroom.

Limitations of reflective practice theory

An interest in professional judgment and reflection has been retained by educators such as Lay and McGuire (2010) in social work and Freshwater et al (2005) in nursing. Schön's (1983) view of the reflective practitioner insisted on tacit knowledge and described cycles of reflection in and on action which allow practitioners to think on their feet and adapt their conceptual and theoretical resources to changing situations. Kolb (1984) recognised that conceptual thinking is deployed in parts of the learning cycle as the practitioner responds to the uncertainties of the practice terrain. Schön's 'swampy lowlands of practice' are as important for knowledge generation as the 'high ground' of theory. By implication the reflective practitioner must contain the anxiety this uncertain material is likely to evoke and to continue to use it as a basis for thought and action (Fook 2007). However, reflective practitioner theory stops short of an account of *how* the emotions might influence judgment, or the capacity to learn; nor has it developed a theory of the unconscious, defended dimensions of subjective experience, unavailable to reflective cognition. These are consigned to the 'swamp'. There are other criticisms of reflective practitioner theory: Boud (1999) highlights the danger of simplistic, prescriptive and over-

intellectualised models, based on a voluntaristic conception of the self as reflective agent, able to apprehend itself as object (Kondrat 1999). Ixer (1999) asks how cultural or biographical biases can be avoided. Others have pointed to the evolution of a professional self over time (see Ruch et al 2010). Reupert (2009) points out that self-reflection often fails to bridge the gap between insight and practice. Whilst reflective practitioner approaches have promoted a tolerance of uncertainty and contradiction, reflection tends to be seen as an enactment rather than a process which implicates a conflicted subject with an inner world. Factors likely to interrupt the reflective process have been under-theorised, whether these arise from the biographical dispositions of the practitioner, the affective environment for practice or the distortions of power and ideology.

Some of these shortcomings have been addressed by authors advocating Critical Reflection (for example Fook et al 2006) which have sought to combine the insights of reflective practice with the critical promise of social constructionism. A stream of empirical studies have enhanced understanding of workplace interactions and systems in circumstances where professional judgment and decision-making is compromised. White et al's (2009) observational studies of contemporary use of technology to by-pass discretion are a case in point. While this work has offered a considerable advance in bringing affective dimensions of practice, an understanding of cultural specificity and the critique of oppressive power relations, into the same frame, it leaves open the question of how professional–user–institutional relations might be *experienced* and how the professional might turn the 'inner ear' reflexively towards the situated self in interaction with the situated other (Britton 1998). At

stake is the subtle interplay between immersion in, and analytic distance from the object (Froggett and Briggs 2012); the maintenance of concern under pressure; and personal and environmental conditions which obstruct or enable such responsiveness. In the next section we will turn to a description of the course as it is structured in the three national contexts.

Development of the Course on Use of Self

The course first developed in the U.K. as part of a thrust towards the introduction of Psychosocial Studies into the curriculum (http://www.psychosocial-studies-association.org/). A shared interest in psychoanalytic theory on the part of the course leaders in Quebec and Norway led to the development of parallel courses. In all three countries, the course aims to have students become more aware of their psychological selves in relation to the work they do, whilst maintaining a socially critical stance The theoretical lens derives from a psychosocial perspective and an examination of the role of emotions in relationship-based professions. A key first task of the course is to help students grasp the complexity of experience whereby personal/institutional/societal inter-penetrate, reinforce or modify each other. This is depicted in the diagram below.

Mutually Dependent Dimensions of Psychosocial Experience

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Fig. 1 Interdependent Dimensions of Psychosocial Experience

The concentric circles draw attention the fact that practitioners experience these dimensions 'all at once' and as mutually constitutive. This leads to questions of how

it might be possible to select appropriate theory without becoming overwhelmed and it paves the way for holistic case study-based learning in which student practitioner and practice supervisor are always seen as an integral part of the case scenario. The aim is to help them recognize that in practice situations both conscious intentions and unconscious projections influence all parts of the system. Since the latter are, by definition, hard to spot, the rationale for peer learning should become clear from the outset. Although conceptual and theoretical frameworks are introduced in conventional lecture format to guide students through practice and policy-based material, the core of the teaching revolves around group discussion of topical material from a psychosocial perspective. Whilst case discussion revolves around students' own practice experience, reference to wider contextual concerns (such as policy shifts, serious case reviews or national disasters) draws on journalism, government reports, sociological studies and public enquiries. Course material tacks back and forth between the intimate, local and particular and the role of the health or social worker in the community, institutions and the public domain.

The aim is to avoid divisions between policy and practice and show that the emotional demands of practice are *shaped* (rather than determined) by context as well as cognitive understanding and institutional imperatives. The emotional and moral economy produced by forms of welfare state regulation (new public governance) profoundly influence the emotional, and relational climate of the workplace and the behaviors and actions possible within it. Understanding this forestalls tendencies to 'lean' defensively on workplace systems that appear to be the expression of an unassailable status quo (Menzies Lyth 1959, Ramvi 2007). The

course makes liberal use of events in the media and the students' own responses to them, as well as the collective or public affects that such events arouse. For example, it has discussed child murder and the differing public and professional responses in the UK and Norway and linked these differences to contrasts in the respective welfare systems' ability to provide institutional containers. It has discussed the states of mind and public responses aroused by national catastrophes such as the collapse of the Hillsborough Stadium in England, or the Breivik mass murder of Norwegian teenagers. It considers the emotional capacities or inclinations implicated in restorative and retributive justice, celebrity cultures, bullying, religious fundamentalisms, the demonization of the poor, hatred of immigrants and denigration of women. Such material is analysed in terms of 'structures of feeling' or social processes which are partly unconscious and which implicate helping professions and the disadvantaged and stigmatized people they work with. Naturally, the course also makes use of material of specific professional concern such as public inquiries into child abuse or maltreatment of vulnerable adults in inter-professional systems where many appear to be looking, but nobody seems to 'see' the victim.

A Psychosocial Understanding of Oppression

The course offers a psychosocial rather than sociological account of oppression and exploitation, aiming to explain the psychic intractability of discrimination and scapegoating in the face of reason. Hence in the second part it devotes attention to the *psychosocial* configurations of racism, gender discrimination and other forms of marginalisation and exclusion. In order to account for how it becomes possible to

'see' the other in their situation and maintain concern for their welfare, it introduces the themes of recognition, reparation and compassion and discusses the psychosocial conditions of their possibility.

The objective is to enable students understand that they are present in everything they think or do, even when their actions appear to be constrained by forces remote from their influence, and to help them use themselves as an instrument of understanding. Envisaging themselves and/or the people they work with at the centre of the concentric circles, is therefore a key organizing principle. Other parts of the curriculum start with systems, organisations and their societal determinants and move to professional practice, then to the subsidiary 'personal issues' likely to emerge. We reverse the lens, beginning with the development of mind within the parent-infant dyad; individuation and recognition of other minds; and the capacity to interact with peers, groups, institutions and societies. Each step in this gathering relational complexity is seen as arousing specific anxieties which stimulate characteristic defenses, as well as opportunities for learning, generative relations with others, and entry into history and culture.

Object Relations Theory: A Container for Relationship-based Practice

The first part of the course is broadly informed by object relations and post-Kleinian theory because Klein's (1959 [1985]) characterization of mental 'positions' is richly descriptive of fragmented, persecutory and reparative states of mind that students recognize within themselves as they confront the twin challenges of practice and academic learning. Winnicott's notions of potential space, and creative

symbolization (Winnicott 1971) and Bion's account of container-contained, learning from experience and reverie (Bion [1962] 1991) are introduced because they describe the conditions which allow practitioners to sustain a curious, thoughtful moral response to the other, when they themselves feel stressed and uncertain. An exploration of transference and countertransference within the holding environment of the course (Ward 2008) is helpful in enabling them to work with people who they may find challenging. Students who have struggled with the emotional demands of practice placements in institutions which appear to offer a variable quality of supervision, express profound relief on encountering these concepts which, if taught through contemporary and contextualised case material, enable them to position themselves in a field of practice tensions and develop effective ways of collaborating with service users out of this awareness. There is relief in the acknowledgement that under pressure we can all regress to infantile or primitive states of mind where empathic understanding of the other is precluded. An outcome of the course is a dawning realisation of what they need to ask of themselves, their practice tutors and their placements when this happens.

Socially structured Defenses

Some time is devoted to helping students identify the socially structured defenses in the particular organisations where they work (Menzies Lyth 1959, Bower 2005). For example it is vital that they have space within the seminar groups to discuss how an outcomes-led culture of service delivery can either support or substitute for professional responsibility, depending on whether service outcomes are used as a singular standard of evaluation, or as a support for triangular thinking where the

often competing concerns of service user, institution and professional must be held in balance. Students explore the perversions and evasions enabled by externally imposed targets and accountabilities, in the absence of a sense of internal authority, and the 'internal supervisor' required to sustain such authority. In short the aim is to help them both understand and 'feel' differences between governance as regulation and governance as containment.

Course Assignment

Only one assignment option is available: students are asked to consider the personal biographical influences which led them to decide on their chosen profession and to write about how their experiences in practice settings have either supported or confounded their expectations. They are expected to use the conceptual frameworks selectively and appropriately, and self-revelation should be selective and appropriate too, as managing personal boundaries will be an ongoing feature of practice. The completed assignments have shown how the course has been used by students to link their career choice to personal biography; to address disturbing material that they have invariably encountered at work; to use peer process within the course setting; to engage emotionally and manage boundaries with people they encounter; to draw on a wide range of perceptual and sensory faculties when making judgments, to reflect on their feelings and experiences, and to integrate research based knowledge with practice. All this requires rich 'psycho-' and 'socio-' dynamic understanding of 'the client in their situation' (Richmond 1917). For example, one student wrote of her father's imprisonment and it's significance for her decision to become a social worker. She reflected on how the 'oedipal' father who had

mediated her entry into her family's wider cultural milieu had taught her 'third position thinking' from the perspective of the non-intimate, non-familial other. He then himself became subject of a closed system and total institution that imploded the family's 'free thinking' and with it their sense of citizenship. She had to consider how an overwhelming need to heal the family trauma had inflected her own professional self-understanding and projections onto the people she worked with so that her default position was to interpret predicaments through the trope of confinement and escape. She could then to enjoy the gratification of her own moral outrage against constraint. Re-finding an ambivalent third position from which to think was vital before she could develop the capacity for 'working through' an open-ended problem with a client within the parameters of a realistic assessment of institutional limits.

Conclusion

Our aim has been to deliver a course in which the case scenarios, contextual and conceptual material are intertwined and the integrating function is provided by the reflexive knowledge and understanding of the student. In this way it seeks to demonstrate that critical consciousness and reflexive emotional awareness are not at odds with each other. Students learn that the task is to think them together and that this requires an understanding of both conscious and unconscious relational and developmental processes at work in everyday professional settings. The aim is to help them understand that neither psychological or social reductionism will serve them well in practice situations and that any form of determinism: structural,

linguistic or psychological will limit their scope for working creatively alongside service users.

The course therefore maintains a central role for systemic critical thinking so that students are well-prepared to appraise, negotiate or challenge the systems of management and governance within which they will operate. However unlike a conventional critical social policy or administration they understand that an *effective* application of critical thinking begins from a profoundly relational awareness of how both professional and service user are enmeshed in affective as well as technical-rational systems which create the emotional and political conditions of their interaction.

In terms of evidentialism, the course provides an appreciation of how 'practice nearness' and 'practice distance' are distinct and complementary roles in research practice for relational professions. Although research methods as such are taught elsewhere, students are encouraged to consider what a practice-led research agenda might look like, how empirical research is but one form of knowledge for practice situations and how they might formulate research questions which respond to practice concerns and incorporate practitioner experience.

As far as Anti-Oppressive Practice is concerned students learn that the psychic and the social always interpenetrate. Oppression therefore needs to be grasped in terms of how it is produced societally and institutionally, how it is enacted in interpersonal

relationships and also how it is internalised, represented and reproduced by individuals within any given set of power relations.

The shortcomings of competency-led education have been addressed through process and peer-led learning in groups and by structuring the course around a close-knit conceptual and experiential core, limiting the range of psychosocial theory in favour of depth understanding and application. This is helpful for students who develop familiarity with an approach that they can *use.* Once they have had the experience of putting concepts and experience into dialogue, they will have learnt something about professional learning that will help them integrate new concepts in the future.

The biographical and experience-near requirements of the assignment are specifically designed to avoid formulaic demonstrations of competence. Unusually within the curriculum, there is space for students to acknowledge uncertainty, vulnerability, failure, defensiveness, rivalry, anxiety and even prejudice. The requirement is not that they demonstrate they have resolved such issues, but that they can think about them and explore the resources - internal and external – for mitigating any damaging effects on their practice, in short: learning from experience.

The course has now been running for some 10 years in the UK, 5 years in Quebec and is into its third year in Norway. It is resource intensive and has survived in its present form with small seminar groups because of its performance in successive student evaluations. Students often claim it has changed them while helping them to

navigate the field of professional tensions into which they are pitched. It has also attracted strong support from external examiners who have persistently endorsed the quality of work produced.

The final word should therefore go to student evaluations which tend to be highly individual reflecting dimensions of professional development that each student has found most challenging. For example:

> …It was striking to me that I did not talk about the loss of my client when you asked about my work experiences. I had been carrying that guilt and anguish with me for seven years and considered it the biggest failure of my career. The readings helped me reframe how I understood this case and my relationship with the client…. After sharing this case with the class I was overwhelmed with how supportive my peers were and their empathetic concern for what this young man had experienced before his death. It was the supervision that I needed seven years ago and was never available to me and for that alone I am so grateful to have been a part of this course. It does not haunt me anymore; I still care about the client and value the time that we worked together but with a new sense of peace...

Another student (C.C.) reflects in her essay on the impact of the course:

…I think what this course has taught me is that I can be an effective worker in spite of my own family history and personal experiences that I have inevitably brought along with me on this journey. It's these experiences that have attracted me to the helping profession in the first place….

…..The struggle for me lies in my concern that if I continue working in the field I will sacrifice my own needs and ultimately continue to feel unsatisfied in my personal and professional life. … I feel I am no longer able to avoid or repress issues that might otherwise have gone unexplored had I never entered the helping profession. I think that this course has helped me to recognize what issues I may need to address and what supports I need in place if I am to continue practicing in the profession.

Another writes of a growing personal as well as professional self-awareness …..Prior to taking this course I often struggled with negative feelings about the work and the impact it was having on me. I now feel I have acquired a new language to describe some of what I have been experiencing over the past three years of my professional life and essentially all along

And finally a student writes of the benefits of understanding her position in the workplace psychosocially.

…It took some time before the penny began to drop, I think I was quite naïve about the politics of the profession and I was getting quite stressed trying to square what I saw in the workplace with my values and beginning to wonder whether I would be up to it… Understanding the system in relation to problems I was having gave me a better sense of where it was and wasn't about me. I no longer feel so overwhelmed.

Like Berit at the beginning of this article, these students are identifying key moments in their professional journey which involve theoretical, practical and emotional learning. It seems evident that this course meets an urgent need for containment of the inevitable anxieties experienced by workers in relationship-based practice as they navigate professional and political contexts where a reflexive use of self in role is under-valued. In confronting the depth and complexity of practice, it offers both conceptual tools and an opportunity for experiential learning which can support professional judgment throughout a career. This kind of training provides a psychosocial support to practitioners who must develop emotional literacy and resilience along with an ability to appraise and critique institutional and political structures. Its aim, in short, is to help them think the 'psycho' and the 'social' together and as such we would welcome its adoption in other settings.

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