A System of Research Dissemination for Clinical and Counselling Psychology

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The views expressed in this research project are those of the author and do not necessarily reflect the views of the supervisory team, Middlesex University, or the examiners of this work.

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Abstract

This thesis integrates the reflective components of action research, appreciative inquiry and autobiographical methods. Through the thesis, a model of dissemination of research in the fields of clinical and counselling psychology is presented. Its key components include collaboration and collaborative/relational reflection, appreciative inquiry and the researcher-practitioner/reflective-practitioner framework. Other important elements include collaborations that link research, practice and reflection, the identifying and supporting the development of potential leaders, leading research projects and training and conferences. Public Works such as the "Up Skilling the Specialist Mental Health Workforce in Psychological Practice Skills" and The European Journal of Counselling Psychology are used as foundations for this model. The thesis concludes with action planning for the future as part of the action research and appreciative inquiry forward spirals of planning, action, reflection, planning; this includes developments in the field of independent practice of clinical and counselling psychology.

Keywords

Clinical psychology, counselling psychology, research dissemination

1. Introduction

As a Clinical and Counselling Psychologist, I am steeped in the ways of the researcher-practitioner framework. Within this framework, psychology practice and research are considered inseparable. Research grounds practice into evidence-base, whilst practice focuses research and provides data that can be analysed in partnership with the psychologist and their clients for the sake of further action. This underpins contemporary training in Clinical and Counselling Psychology in the UK as these are regulated by the Health and Care Professions Council (HCPC) which is the statutory regulator in the UK and the British Psychological Society (BPS) which is the professional regulator. The Quality Assurance Agency for Higher Education (QAA, 2011) doctoral degree characteristics specify the DClinPsy as one of the most common doctoral awards which "aim to develop an individual's professional practice and to support them in producing a contribution to (professional) knowledge" (p. 33). At the same time, it highlights that this doctoral degree is different from most other professional doctorates because it provides a license to practice for UK Clinical Psychologists. The HCPC (2009) specify that the threshold level of qualification for Clinical and Counselling Psychologists is the practitioner doctorate. The HCPC (2015) Standards of Proficiency for Practitioner Psychologists specify the requirement for Clinical and Counselling Psychologists at the point of registration to "be able to generalise and synthesise prior knowledge and experience in order to apply them critically and creatively in different settings and novel situations" (p. 21), as well as "be able to initiate, design, develop, conduct and critically evaluate psychological research" (p. 22).

Unlike several other health and care professions (including those linked to talking therapies), clinical and counselling psychology are the only regulated disciplines that statutory regulation by the HCPC has been at doctoral level since 2009. Moreover, since

1996, the clinical and counselling psychology courses that have been accredited by the BPS have been at doctoral level.

I would like to use the opportunity of the context statement to conduct a larger cycle of reflection of my Public Works that is in line with the action-reflection spirals of action research for (a) the Up Skilling project, (b) The European Journal of Counselling Psychology (EJCoP) and The European Association of Counselling Psychology (EACP) and (c) the broader collection of my Public Works that have been fostering professional standards in clinical and counselling psychology at national level and beyond that use the researcher-practitioner (including the reflective-practitioner) framework. Finally, I will conclude with a consideration of interactions between these three clusters of my work.

Following the Professional Biography section, I present the methodological framework adopted for this thesis. The Methods section includes how this framework asserts method-specific requirements for undertaking action reflection spirals of works in the public domain.

2. Positioning Statement

I am delighted to have the opportunity to review my professional journey to deepen the reflection on my work.

2.1 Professional Biography and the Connecting Themes

In this section, I aim to position my work in the context of my biography and in relation to the themes of: the researcher-practitioner framework (including the reflective-practitioner); relational reflection (in the context of appreciative inquiry and action research); valuing difference without confusing excellence with perfection and the system of dissemination, on which I will expand below.

My training and practice in psychology is based on my earlier life formative experiences that link the tensions between abilities and disabilities, as well as leadership in dissemination of knowledge through relationships (Figure 1).

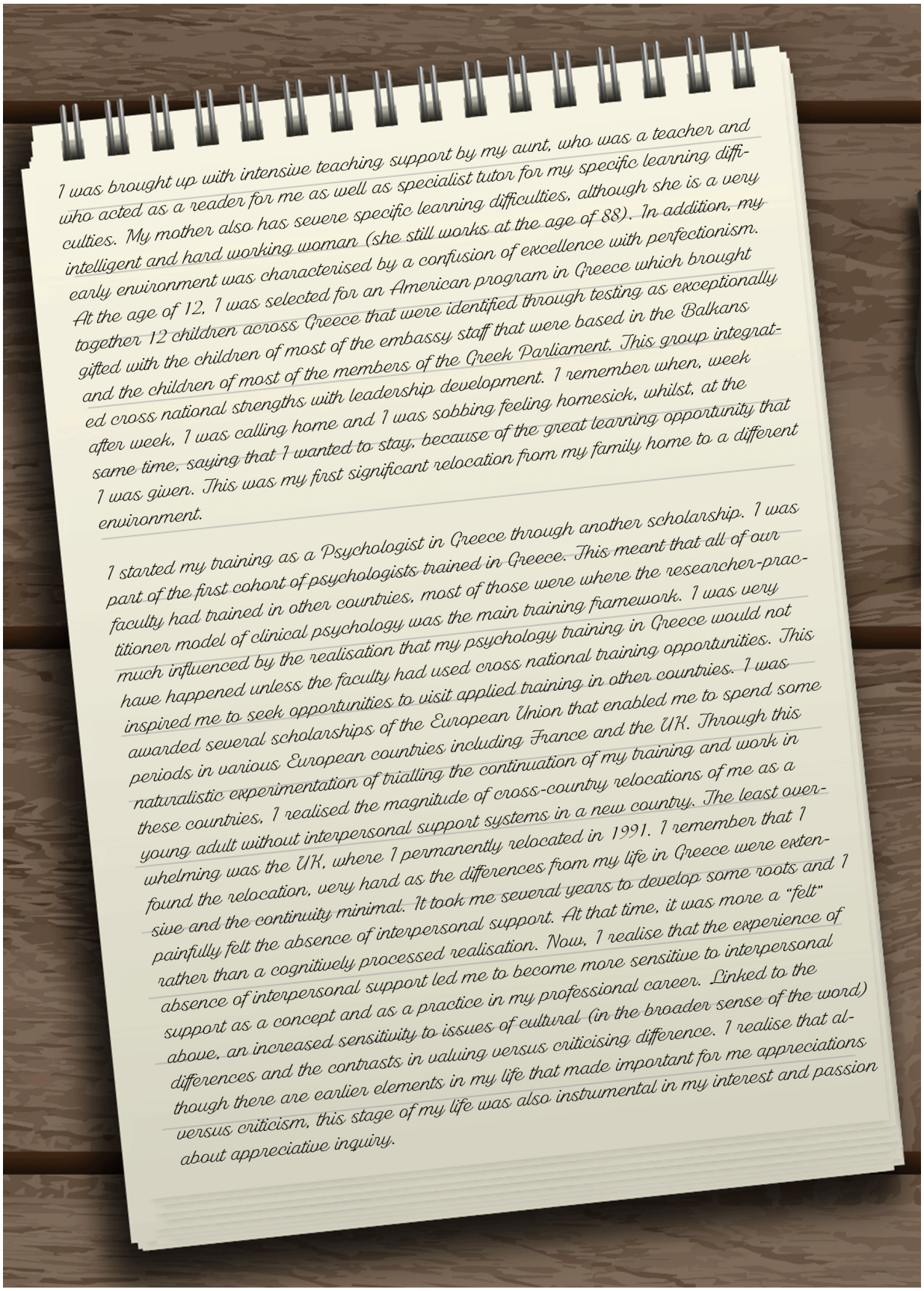

Figure 1. Reflective log on my earlier journey

I qualified as a psychological therapist in 1995, after a three-year MSc in counselling psychology which was partly supported through an Alcohol Concern and King's Fund scholarship. This included a range of clinical placements and models, as well as linking research and practice sensitising me more to the researcher-practitioner model. I combined that training with additional training at the Metanoia Institute, Physis and other experiential psychotherapy courses. My training included the epistemological frameworks of Clarkson (a Clinical and Counselling Psychologist) which highlight the importance of relationships, as well as the researcher-practitioner including the reflective-practitioner frameworks. I then progressed my studies so that I could bring my psychological therapy qualification up to the doctoral level of the British Psychological Society (BPS) professional qualification in counselling psychology, which I accomplished in 1996.

In 1999, I commenced a two-year advanced training with Clarkson, who emphasised in her work the importance of relationships. During this training, I advanced my understanding of her two key models: (a) the five relationships clinical and research model and (b) the seven domains epistemological model (see appendix for the latter). The seven domains model provides a framework to attribute differences to different levels of discourse rather than falling into the trap of right and wrong dichotomy. This model also fits with the reflective-practitioner framework, as well as providing a container for differences of opinion that may emerge when I have engaged with a range of dissemination activities in my work.

From 1999, I worked in the National Health Service (NHS) for over a decade. There is standardisation of job descriptions and person specifications for Clinical and Counselling Psychologists working in the NHS. These have been cross-referenced by the Agenda for Change occupational job analysis framework, which recognises that Clinical and Counselling Psychologists work at post-doctoral level. Thus, my satisfactory employee appraisals evidence that my work has been at post-doctoral level. My career progressions evidence that I have exceeded the minimal post-doctoral standards.

A System of Research Dissemination

As part of the researcher-practitioner framework, my work included the translation of Clarkson's model of the five relationships into learning disabilities and then into broader areas of clinical and counselling psychology practice, in my own practice. My career progressions have included working as a Senior and then Principal Psychologist and finally, as a Consultant Psychologist, the latter is bench-marked as six-years post-doctoral level by the National Assessors' Group, that was developed under the auspices of the BPS and the government Department of Health.

In 2004, I accepted the honour of the Division of Counselling Psychology of the BPS to guest edit a special edition of the Counselling Psychology Review (i.e. its peer reviewed journal) on counselling psychology and psychological testing. That was an important experience that I utilised subsequently, including in relation to the three areas, upon which this context statement focuses. Through that experience, I deepened my understanding of rigorous dissemination of psychology research with a particular emphasis on what is relevant for practitioners. Moreover, this was an international issue which provided me with the opportunity to liaise with key international figures including the chair of the South African Counselling Psychology Division. Through such liaison we were able to collaboratively reflect on the different perspectives regarding the skills that the current training provided to Counselling Psychologists and gaps with the emerging needs, taking into account the development of the discipline in the foreseeable future.

I have been working as a Consultant Psychologist since 2006, with several re-appointments in NHS Trusts for roles that have entailed high level of influencing and dissemination of psychological knowledge. These included my role as Consultant Psychologist in NICE (National Institute for Health and Clinical/Care Excellence) Implementation for Kent and Medway Partnership NHS Trust. I felt inspired by NICE's focus on the utilisation of research to inform practice in light of evidence, as well as the identification of further research questions that would be very useful for clinical practice. NICE has been a highly influential public organisation and I was appointed as a member

of its national Implementation Reference Group, where I have served for several years. The evidence of my success working at this senior post-doctoral level include my appointment in the Expert Reference Group for the NICE regarding the Commissioning Guide for Cognitive Behavioural Therapy and subsequently the Commissioning Guide for Psychological Therapies in the NHS, which have underpinned the recent expansion of psychological therapies in the NHS across England. In 2007 I was selected for a year-long intensive training for aspiring directors at the NHS Institute for Innovation and Improvement, which cultivated my strategic and interpersonal capabilities regarding change towards utilising evidence in practice.

I have adopted a framework for dissemination of knowledge. As explained by many academicians (Nonaka, 1994), there are different types of knowledge, mainly explicit knowledge, implicit knowledge and tacit knowledge, each with its specific preservation and transfer methods. It is therefore important that knowledge is communicated in different ways, ranging from formal presentations and publications to informal interactions.

In the above context, I was inspired to bring together Counselling Psychologists across Europe and in 2007, formed the European Association of Counselling Psychology (EACP). Soon it became apparent to me that a robust professional association needed a solid foundation of evidence-based practice. Therefore, in 2009 I launched the European Journal of Counselling Psychology (EJCoP). The Journal and the Association are one of the three areas that the context statement addresses in greater detail in the subsequent sections.

At the same time, I joined Europe's Journal of Psychology (EJOP) as an Associate Editor for Clinical and Counselling Psychology. This was an important experience through which I learnt more about cross national collaborations and differences in expectations and processes across research institutes and organisations responsible for the dissemination of research findings.

In 2009, I was also selected as a National Assessor for the appointment of Consultant Psychologists in Health and Social Care under the auspices of the Division of Clinical Psychology of the BPS. This was an important experience, in which I collaborated with other senior Clinical and Counselling Psychologists to identify excellence in leaders in these fields without confusing this with perfectionism. An important element of this was their reflections and the links with action. Moreover, this appointment has provided me with an important forum to disseminate the ideas and insight that I have been developing in collaboration with others, so that these inform further action.

Since 2009, I have been appointed as Assessor and Fitness to Practice Panel Member for the Statutory Regulator for clinical and counselling psychology, which again are at senior post-doctoral level as they assess the post-doctoral practice-related knowledge and skills of their registrants. Having served for many years as a member of the Board of Assessors for one of the BPS doctorate-level qualification, I have also acted as the external examiner for a doctorate thesis for the University of Wales & Regents University. These recently led to my appointment as clinical and counselling psychology representative for the statutory recognition/accreditation by the HCPC (the statutory regulator) of the doctoral courses. This recognition-accreditation compliments the professional accreditation of those courses by the BPS as the professional regulator (I have been able to participate in the latter but I prioritised the former as this is a mandatory accreditation). I have given significant priority to these roles because they entail a high degree of influence. Therefore, these are a part of the framework of dissemination of the researcher-practitioner (including the reflective-practitioner) for clinical and counselling psychology, as well as how standards of excellence are not confused with perfectionism.

Building on my previous experience as a member of the NICE Implementation National Reference Group, I was initially appointed as the Regional Lead for the West Midlands for the National Audit for Psychological Therapies at the Royal College of Psychiatrists from 2010 to 2014. Soon after this appointment, I was also contracted as the Regional Lead for

the South-East Coast. This audit was the highest profile audit across England and Wales linked to psychological practice over this four-year period. I conceptualise audit activity as closely related to research with the latter focusing on generation of standards whilst the former exploring their adoption. This audit entailed a high level of collaboration; a big part of my role was to engage the broad range of stakeholders across the West Midlands and the South-East Coast. This work involved cycles of dissemination and collaborative reflection to enhance practice by identifying and sharing strengths across services. An example of this was the conference workshop in 2013 which I presented the key findings (Kanellakis, 2013) and facilitated the reflections of the participants of how they can use such findings and develop appropriate plans of actions for the future.

In parallel, I was appointed to my first Director of Psychology position at KCA UK 1 (a major provider of NHS commissioned psychological services across the South East). In this context, I met Dr. Davies, Ph.D., the Director of the Association for Psychological Therapies (APT), with whom I co-led a 200-hour training programme (subsequently, we also collaborated in running this programme again, as well as me collaborating with him for several other training courses). Dr. Davies introduced me to his framework of Reinforcing Appropriate and Imploding Disruptive/ less functional (RAID) based on relentlessly appreciating and reinforcing the positives.

In 2012, I was promoted from the position of National Assessor for the appointment of Consultant Psychologists to that of Lead National Assessor. This provided an even more advanced platform to influence, through leading the collaboration with others, the future direction of the application of the research evidence of clinical and counselling psychology. A subsequent key activity has been to lead the update of the guidance on the appointment of Consultant Psychologists using National Assessors (Kanellakis et al., 2016); this was a collaborative project adopting Delphi consensus seeking method. This is

[1] Please note that this organisation had made a formal statement that the letters individually do not stand for something (it is not an acronym).

a very important document that sets the framework of selecting the most senior practitioner psychologists in health and social care, who will be key in leading the profession in the future. Therefore, this is a project about dissemination through identifying, appointing and developing leaders in the field, espousing the researcher-practitioner (including the reflective-practitioner) framework, which underpins contemporary clinical and counselling psychology in the UK.

Also in 2012, I pursued the theme of disseminating the reflective-practitioner and the broader researcher-practitioner frameworks, by collaboratively fostering the identification of strengths in colleagues with leadership capabilities and aspirations, through a workshop that I co-facilitated, under the auspices of the British Psychological Society.

In 2013, I moved from a full-time Director of Psychology position to a part time (Associate) Director of Innovation and Research at KCA UK. This was in line with the key awareness that Clinical and Counselling Psychology's advanced contribution to psychological practice (compared to psychological therapies) is focused upon the researcher-practitioner (including the reflective-practitioner) framework. In this role, I had the opportunity to act as a supervisor for a Master's thesis on health service management utilising an appreciative inquiry method. At the same time, I worked on a part time basis on a piece of collaborative research that was commissioned by the Division of Clinical Psychology of the BPS. This entailed interviewing the Heads of all its subsystems regarding the accreditation of psychological services scheme options. Such Heads included the Chair Faculty of Oncology and Palliative Care, Chair Faculty for Psychosis & Complex Mental Health, Service User and Carer Liaison Committee Member and Wales Representative, Leadership and Management Faculty, Director of Education and Training, Chair DCP Scotland, Chair BPS Faculty of Addictions, Chair of Group of Trainers in Clinical Psychology, Chair West Midlands and Chair South East Coast Branch Faculty for Leadership and Management, Faculty for the Psychology of Older People. Although, this piece of work was not submitted due to its commercially sensitive nature and

confidentiality restrictions in terms of the content (rather than that these interviews took place with all the Heads of the subsystems of the BPS or their deputies), it was an important experience in developing my skills in iterative interviews within the framework of collaborative inquiry action research. This kindled my interest in collaborative action research and I subsequently completed the Action Research Training Programme of Bob Dick alongside professors and other researchers of various disciplines across the world.

In parallel, I was awarded the International Scholar Award for 2013 by the American Psychological Association (APA) and with an additional grant by the BPS. I participated in the globalisation of Counselling Psychology task group between 2012 and 2013.

Subsequently, I accepted the honour to co-chair the 2014 International Congress. I was able to engage hearts and minds through my Chair's keynote speech on Patient Accreditation of Psychological Therapists. I was also able to share information through a research poster on A Framework to Assess Healthcare Data Quality (Warwick et al., 2015) by the team I led. This congress was a wonderful opportunity to advocate informally through verbal liaison with conference attendees.

In 2013, I was elected to the most senior grade of the BPS (i.e. Fellow), in recognition of my "outstanding contribution to the advancement and dissemination of psychological knowledge and practice" (p. 2) in the field.

In 2014, I was contracted as the Senior Research Consultant and Principal/Chief Investigator for an action research project called "Up Skilling the Specialist Mental Health Workforce in Psychological Practice Skills". This project is one of the three areas that the context statement addresses in greater detail in the subsequent sections.

In 2014, I delivered a keynote speech on the Register of Patient Accredited Therapists (RPAT) and a workshop on "Maximizing Your Opportunities to Publish in Peer Reviewed Journals" (Kanellakis, 2015). These took place at the Second International Congress on Clinical and Counselling Psychology, which was part of the Future Academy's

Multidisciplinary Conference (including the Sixth International Conference of Education and Education Psychology).

Although I have completed a lot of post-qualification courses, including many that were organised by the Health and Care Professions Council (HCPC) and the BPS, I am particularly mindful of the impact of attending the Perfectionism workshop led by Shafran in 2015. During that workshop, not only did I learn more about frameworks to enable evaluation and reflection in which high standards are not confused with perfectionism but I was also able to engage in discussions with her regarding how to approach my work in relation to the accreditation of psychological services project. This included how the standards get disseminated; Shafran is an international expert in the field of perfectionism, as well as the dissemination of psychological knowledge so that the gap between practice and knowledge are reduced.

Having a clear understanding of knowledge dissemination models is critical to consciously adopting effective knowledge dissemination techniques that are tailored to each particular situation and audience.

I will start my overarching reflections with acknowledging that, in my professional journey, I have been contemplating on how psychological knowledge can be best disseminated to practitioners. I have been doing this, especially in my senior leadership roles in the fields of clinical and counselling psychology; these have included supervising, training and research related to service evaluation and service development, alongside practitioner duties and direct psychological provision to clients. I conceptualise this as a cluster of models that try to prioritise the key information and skills utilising protocol-based approaches to disseminate those whilst, on the other hand, I perceive a cluster of voices that emphasise the importance for practitioners to be able to cope with complexity. The latter is in line with the doctoral level standards of clinical and counselling psychology, as, in each case, new knowledge and frameworks need to be generated in collaboration with the client regarding what is most helpful for this specific client. In this way, models that are

based on previous research data are used in combination with new data regarding this particular client to generate new models that are specific and applicable to each case. In other words, I came to appreciate the importance of fitting models to each client rather than client to a model. At the same time, this requires in depth knowledge of models (based on research data) rather than lack of such knowledge. I came to the realisation, following extensive reflection on my own training and practice, that I can transcend protocol-based approaches only when I have learnt them because otherwise, it feels like, to me, that I am using the concept of transcendence as a way to cover significant gaps in my knowledge. At the same time, I came to the conclusion that knowledge is a process rather than a fixed point that can be reached. Once the knowledge increases to the next level, new horizons for further knowledge are visible. Therefore, I need to be vigilant to not fall into the trap of perfectionism. One can be endlessly chasing the attainment of absolute knowledge but such attainment is impossible. I also believe that the best quality assurance is a prolonged period of sustained development of one's own knowledge in collaboration with clients but also, in collaboration with other researcher-practitioners. Collaboration (including relational reflection) is, in my opinion, an excellent way to manage imperfection. Examples include the development of relationships with trainers, supervisors and peer networks.

Table 1 presents the Public Works that are included in the appendices (memory stick) and are referred to in this thesis.

Table 1. Public Works

	TITLE	AUTHOR	YEAR	TYPE	LOCATION
1.	The Appointment of Consultant Psychologists: Guidance on using National Assessors for the quality assurance of appointments and clinical governance of psychological practice	Kanellakis, P. et al.	2017	Report	https://www1.bps.org.uk/system/files/Public%20files/Policy/Appointment%20of%20Consultant%20Psychologists%20INF108.pdf

	TITLE	AUTHOR	YEAR	TYPE	LOCATION
2.	Guidelines for National Assessors	Kanellakis, P et al.	2017	Report	https://www1.bps.org.uk/system/files/Public%20files/Policy/Guidelines%20for%20National%20Assessors.pdf
3.	Updating the guidelines for National Assessors using the Delphi method	Mann, E. A. & Kanellakis, P.	2017	Article	https://shop.bps.org.uk/publications/clinical-psychology-forum-no-298-october-2017.html
4.	Improving Patient Outcomes: Effectively Training Healthcare Staff in Psychological Practice Skills: A Mixed Systematic Literature Review	Garzonis, K., Mann, E., Wyrzykowska, A. & Kanellakis, P.	2015	Article	http://ejop.psychopen.eu/article/view/923
5.	A Framework to Assess Healthcare Data Quality	Warwick, W., Johnson, S., Bond, J., Fletcher, G. & Kanellakis, P.	2015	Article	http://dx.doi.org/10.15405/ejsbs.156 http://www.futureacademy.org.uk/files/menu_items/other/13vol156.pdf
6.	A Framework to Assess Healthcare Data Quality	Warwick, W., Johnson, S., Bond, J., Fletcher, G. & Kanellakis, P.	2015	Research poster	https://www.researchgate.net/publication/308120711_A_Framework_to_Assess_Healthcare_Data_Quality
7.	“Bridging academia and practice through action research”	Kanellakis, P.	2015	Conference presentation	https://www.researchgate.net/publication/308121118_Bridging_academia_and_practice_through_action_research

	TITLE	AUTHOR	YEAR	TYPE	LOCATION
8.	"Maximizing Your Opportunities To Publish In Peer Reviewed Journals"	Kanellakis, P.	2015	Workshop	https://www.researchgate.net/publication/308078715_Flipchart_pages_used_in_Maximizing_Your_Opportunities_To_Publish_In_peer_Reviewed_Journals_Workshop https://www.researchgate.net/publication/308420019_Outputs_of_Maximizing_Your_Opportunities_To_Publish_In_peer_Reviewed_Journals_Workshop
9.	5th ICEEPSY: Opening ceremony speech	Kanellakis, P.	2014	Opening ceremony speech	https://www.youtube.com/watch?v=9PmXOQDyOWQ
10.	"The MoodMaster course"	Kanellakis, P.	2014	Keynote Speech	https://www.youtube.com/watch?v=fKqEjcVdX8c
11.	Defining Primary Care Psychology in the Present and for the Future	Wood, K., Kanellakis, P., & Monk, A	2014	Research report	https://www.researchgate.net/publication/308334844_Defining_Primary_Care_Psychology_in_the_Present_and_for_the_Future_Report
12.	"The Register of Patient-Accredited Therapists"	Kanellakis, P.	2014	Conference presentation	https://www.researchgate.net/publication/308334807_Workshop_Patient_accreditation_of_psychological_therapists_The_register_of_patient-accredited_therapists
13.	European Association of Counselling Psychology Award	Kanellakis, P. et al.	2013, 2014, 2015	Award	https://www.researchgate.net/publication/308078729_EACP_Awards_2013_Sponsored_by_Association_of_Psychological_Therapies
14.	The Globalisation Special Task Group	Kanellakis, P. & Wood, K.	2013	Article	https://www.researchgate.net/publication/308120028_The_Globalisation_Special_Task_Group_at_the_2012_American_Psychological_Association_Annual_Convention_Recommendations_for_action

	TITLE	AUTHOR	YEAR	TYPE	LOCATION
15.	"We can't educate a kid once dead"	Kanellakis, P.	2013	Keynote Speech	https://www.youtube.com/watch?v=xLEYg61rMaw
16.	Presentation of NAPT key findings and next steps	Kanellakis, P.	2013	Conference presentation	https://www.researchgate.net/publication/308419942_National_Audit_of_Psychological_Therapies_NAPT_Key_findings_and_next_steps
17.	DcoP Annual Conference "You have already decided to be a leader"	Kanellakis, P. & Nau-Debor, U.	2012	Workshop	https://www.bps.org.uk/events/conferences/division-counselling-psychology-annual-conference-2012/workshop-day
18.	APA Annual Convention: "Counselling Psychologists Regulation and Training in the UK in the context of Europe"	Kanellakis, P.	2012	Conference presentation	https://www.researchgate.net/publication/308335253_Workshop_Counselling_Psychologists_Regulation_and_Training_in_the_UK_in_the_context_of_Europe_Background_and_Strategic_Implications
19.	Division of Counselling Psychology Annual Conference : "Reaching out: Globalisation special task force"	Kanellakis, P.	2012	Keynote speech	https://www.researchgate.net/publication/308335364_Keynote_speech_Reaching_out_Globalisation_special_task_force
20.	Counselling psychology and disability	Kanellakis, P.	2010	Article	http://ejop.psychopen.eu/article/view/188
21.	Public perception of the professional titles used within psychological services	Kanellakis, P. & D'Aubyn, J.	2010	Article	http://www.tandfonline.com/doi/abs/10.1080/14733145.2010.485697#.Vw_iLUweSko
22.	Establishing the European Association of Counselling Psychology.	Kanellakis, P.	2007	Article	https://www.researchgate.net/publication/308078669_Establishing_the_European_Association_of_Counselling_Psychology
23.	Special Edition on Counselling Psychology and Psychological Testing	Kanellakis, P.	2004	Article	http://shop.bps.org.uk/counselling-psychology-review-vol-19-no-4-november-2004.html

3. Methods and Methodological Frameworks

In this section, I start by addressing some epistemological and ontological considerations as the framework of this thesis. I refer to the terms of reflection and reflexivity and link those to action research and the researcher-practitioner framework. I reflect further on challenging underlying assumptions including in relation to what is a valuable contribution, in line with my methodological framework. I address the connections between reflection and research. I also reflect on the iterative characteristic of research. I then focus on dissemination and follow this with applications of appreciative inquiry. I also address dimensions of disability, globalisation and cross-cultural issues. I finish this section by highlighting the model of a broader system of dissemination and the structure of my Public Works to follow.

I appreciate diversity of epistemological and ontological positions. Nevertheless, this thesis needs to be contextualised within its epistemological and ontological foundations. I conceptualise research methods as analogous to means of transport. What makes a good boat is not the same as what makes a good aeroplane or a good car. Someone can appreciate all different types of means of transport; simply the criteria of quality for each one of them will be different (e.g. a good ship does not need to fly) and the differences in functionality affect the criteria of quality. Moreover, what constitutes a good multihull is different to a dinghy or a cruise liner. Returning back to the analogy of the means of transport, this thesis needs to be considered in relation to a multihull rather than a dinghy, cruise liner, aeroplane or a car. For example, some frameworks of critique focus on spotting weaknesses, whilst the methods of this thesis require an openness to what excellence looks like and a valuing of difference, asserting that no framework should be hegemonic.

In line with the researcher-practitioner (including the reflective-practitioner) frameworks, action research is a theme across my work. It connects the Up Skilling project (on which I

built my learning from the accreditation of psychological services project, as well as other research activities), the EJCoP and the broader collaborative/participative dissemination framework.

Drawing upon McNiff's (2013) approach to action research for professional development of the self, a significant part of this work combines contributions to the community of clinical and counselling psychology with action research for me and done by me in collaboration with others. This fits with the person-centred approach that Clinical and Counselling
Psychologists use in clinical and counselling contexts. Such an approach also has value in terms of dissemination of research in my community of clinical and counselling psychology, inclusive of dissemination as research capacity building within the community.

Hase (2014) points out that in action research the impact of the action is an important element of quality notwithstanding the complexities of assessing this. Ballinger, et al. (2004) highlight that the impact in action research becomes much harder to evaluate. A large component of this difficulty is linked to the characteristics of action research in relation to its ongoing iterative process and stakeholder engagement through collaboration, the emphasis on integration and the necessity of the external researcher to step back and allow the rest of the stakeholders to own how they take the project into the future. If action research is effective, then its impact is through influencing others; however, this is from a non-positivistic epistemological framework that goes beyond assumptions and linear models of A causes and influences B to complexity models that include the power of catalysts and multidirectional processes. In a number of projects, the advantages of action research outweigh the limitations in identifying its impact (at least when trying to do so from a positivistic framework). They also highlight that action research epistemologically targets and values discovering what works in unique circumstances; therefore, it does not adopt the principle of generalisability in relation to

episteme, in the way that this is understood by quantitative research. Instead, a person-centred approach is valued, which is in line with the value of clinical and counselling psychology (Rogers, 1951; 1961).

Hase (2014) links reflection and action research in a number of ways. He is a Counselling Psychologist specialising in action research and he highlights how Socrates used to ask questions to his students to facilitate reflection and learning in a collaborative and relational manner. He also refers to Boud and his colleagues (1985, cited in Hase, 2014), who suggest reflecting on one's own experience by adopting a descriptive and non-judgemental approach, examining feelings and discharging those that are negative. Hase additionally refers to Elliott, who sees reflective-practice and action research as an essential part of the job of anyone who aim to develop the knowledge and skills of others.

Action research, as evident from the two words that form this term, combines an action component, as well as a research component. Please note that like some other research methods (e.g. thematic analysis; Braun and Clarke, 2006), action research is both a research method itself and an umbrella term to include a number of other research methods that fit with it (e.g. Delphi consensus-seeking method and appreciative inquiry, Dick, 1997; 2000; 2014; 2016).

A key feature of action research is its cyclical nature in terms of having action and reflection intertwining. Therefore, diagrammatically, action research is often presented with a visual aid of cycles. However, I particularly like the adaptations of the visual representations that use forward spirals and cones (Lewin, 1946; cited in Berg, 2004). The spirals integrate the dimension of time, which moves forward. The cones highlight gradual or iterative processes that have an element of refinement.

In my work, I have found useful two models of reflection and action cycles or spirals. Through my earlier work as a Director at KCA, I became familiar with the organisation's adopted model; this was the "act and observe, reflect and then another cycle of planning". It underpinned the Serious Incidents Requiring Investigation analysis which I chaired as

the Director of Psychology to meet the requirements of the Health and Social Care commissioners. Through my training, in action research that I completed in 2014, led by Dick, I became aware of the connection of this model with action research.

Action research not only fits with the researcher-practitioner framework for psychologists, but, also, it emphasises the importance of bridging researchers and practitioners, with which I highly resonate. A discipline that does not have evidence for its effectiveness and does not develop innovations that are effective is doomed to wither and cease to exist. Successful research cannot be separated from its impact on practice and researchers need to be mindful of the needs, obstacles and dilemmas of practitioners. Similarly, successful practitioners use evidence-based interventions in their work and take into account research evidence to inform their decisions in clinical practice.

The ongoing links between reflection and research have been shown to contribute to the usefulness of action research as a research process. The link does not simply come from evaluating whether a change has occurred or it is effective; the iterative process also allows for this evaluation to be fed back into the practice setting and to be used to inform current and future work. This is a claim that can be made potentially from all research. However, some of the research is much more linked to closed questions. We develop a hypothesis and the question is: is this the case or is this not the case? In my experience, action research focuses less on the why and more on the how.

Another key feature of action research, for me, is its iterative process. It could be argued that all research is iterative, as all research needs to involve some review of the previous related research, that is followed by some testing and some reflection in the form of discussion. Researchers usually follow a train of thought or logic. However, what I am finding different in action research is the integration of several cycles within one piece of research rather than passing more or less the baton to other people. Ballinger, et al. (2004), who linked action research with clinical psychology, highlight the integrative and collaborative nature of this method. The iterative process in action research is, therefore,

closely linked to the spiral visual representation; such an image can include spirals within each spiral. The spirals within spirals enable rapid adaptation to situations whilst the larger spirals enable broader perspective from a distance.

Dissemination is an important other feature of action research and especially collaborative/participative action research. I believe that conducting research but not disseminating its findings is unethical. Clinical, and especially, counselling psychology face the challenge that even when research is conducted it is often not disseminated. A key example of this is the research by doctoral students in the fields of clinical and counselling psychology, which is far too often not published nor disseminated through a broad network of routes (e.g. through conference presentations and lay person publications). Similarly, I have developed strong concerns regarding research that is only shared with funders who can decide whether to restrict its publication and therefore, obstruct the development of knowledge. Dissemination is also part of the forward spirals mentioned above. When we share our findings and learnings with other researchers and practitioners across disciplines, we also have the opportunity to receive feedback from them which enhances the quality of our reflection and future steps.

3.1 Appreciative Inquiry as a Method of Reflection, with Particular Relevance to Action Research in Clinical Practice

I understand that “critical evaluation” of Public Works is an important component of the thesis of DProfs by Public Works. The framework that I will use is that of appreciative inquiry because it is congruent with the epistemological and educational foundations of my work. Appreciative inquiry has been linked to action research by several researchers including Dick (2014) and Dewar and Sharp (2013).

Dick (2014) highlights that rigour in action research could be advanced through examining key underlying assumptions and taking them through the process of disproving

alternatives. This can be done within an appreciative inquiry framework by examining alternative hypotheses that underpin the positives that are identified.

Reflections utilising an appreciative inquiry framework look very different from those that critique works based, for example, on critical theory. Appreciative inquiry does not focus on errors or imperfections. My appreciative inquiry framework has also been influenced by the work of Gilbert (2010), who differentiated compassionate self-correction from shame-based attacking. He defined the former as forward looking, utilising encouragement, support and kindness, whilst he differentiates the latter in relation to its focus on the past. Drawing on a large pool of evidence, Egan et al. (2011) highlight the dangers of focusing on the past with a critical lens. They link this (especially when it is done with a drive for precision and detail) with obsessiveness, rumination and clinical trans-diagnostic processes of perfectionism, which they link with erosion of self-esteem and productivity. In this context, perfectionism and excellence are conceptualised as opposing constructs (Shafran, 2015), as I will explain further below.

In parallel, I have been very influenced by the work of Davies (2013) and his conclusions regarding the most effective way of learning based on his experience of overseeing the training of over 100,000 health professionals in the UK as the Academic Director of the Association for Psychological Therapies. Davies builds on the earlier evidence-based behavioural theories including operant conditioning, positive reinforcement and shaping. These models emphasise the reinforcing effect of rewards including praise and learning from the behaviours that are proximal to the desired behaviour (rather than waiting for the perfect match). Davies utilises the metaphor of going off track whilst driving a car and the recommended way for returning back to the road which is by looking where they need to be going (rather than not where one is currently going). Instead of focusing on errors, Davies recommends that one briefly notices discrepancies in objectives and behaviour and merely corrects miscommunications/misunderstandings. The emphasis by Davies's on the positives is also linked with evidence-based psychological theories regarding self-

esteem; people who have been supported to feel confident tend to learn more than people whose confidence pulls them away from learning.

I see such methodological issues (critical evaluation, appreciative inquiry and action research) linked to disability and globalisation-linked cross-cultural dimensions. In my paper “Counselling Psychology and Disability” (Kanellakis, 2010), I build on others’ research-based practice and reflections, as well as my own personal experiences as a person with diagnosed disabilities. In my paper, I highlighted the relational and social aspects of disability, especially how it has been understood in counselling psychology. This fits with the legal obligations of educational and psychological practice to enable people with disabilities to overcome barriers that are primarily linked to our social conventions and underlying assumptions, rather than the genuine abilities of individuals. Such underlying assumptions that are fed by our social conventions create a glass ceiling and those who are differently able are too easily mistaken for unable. This has been very much my experience. Instead of using every previous achievement to notice abilities, far too often my previous achievements have been used as a discounting of my abilities, especially when those do not fit the dominant model of how abilities are demonstrated. In this context, the appreciative inquiry research method is critical, as it complements the work of Dweck (2012) on rewarding effort and progress rather than outputs, as the former cultivate excellence. Using an appreciative inquiry model for critical evaluation requires all parties to actively strive towards repeatedly and relentlessly identifying strengths.

I see appreciative inquiry closely linked to the work of Shafran (2015), which highlights the dangers of perfectionism. I have found the strength-focused appreciative inquiry motivating and, therefore, cultivating the conditions for action. In my experience, the opposite is also true in that focusing on imperfections and faults interacts with the discriminations that I have experienced through additionally belonging to other minority groups. I have also found inspiring the work of Robinson (2011) regarding specific learning difficulties, culture and globalisation.

Working across national borders and my cross-cultural work related to globalisation taught me that ethnic groups are not merely different (and at risk of separation) on the grounds of language. Linguistic differences mirror cultural differences and there are powerful forces driving cultural imperialism (cultural imperialism is fueled by valuing the cultural dominant frameworks over others). Therefore, dyslexia can be understood as a difference of communication, which corresponds with much broader differences in the way that people relate to and view the world. Relating to another is more than simply translating the words from one language to another; it also requires, from all parties, a willingness to understand and value each other's perspective, being mindful of variation of values. Thus, language is not only a translation of something, it also affects the way that we see things.

In my disability paper, I reflect upon the research, and its implication for practice, in relation to how belonging to multiple minority groups massively increases the oppression and discrimination, which seems to operate in an unconscious but, nevertheless, very powerful way. Therefore, conscious and ongoing effort to challenge at individual and group level such hegemony of values and frameworks is required.

My reflections have integrated elements of thematic analysis (Braun and Clarke, 2006) in that, through a process of iterative reflections across a range of research contexts, I generated a thematic analysis of research dissemination. Figure 2 presents the model for the broader system of dissemination that has emerged and will be used to organise my Public Works and learning.

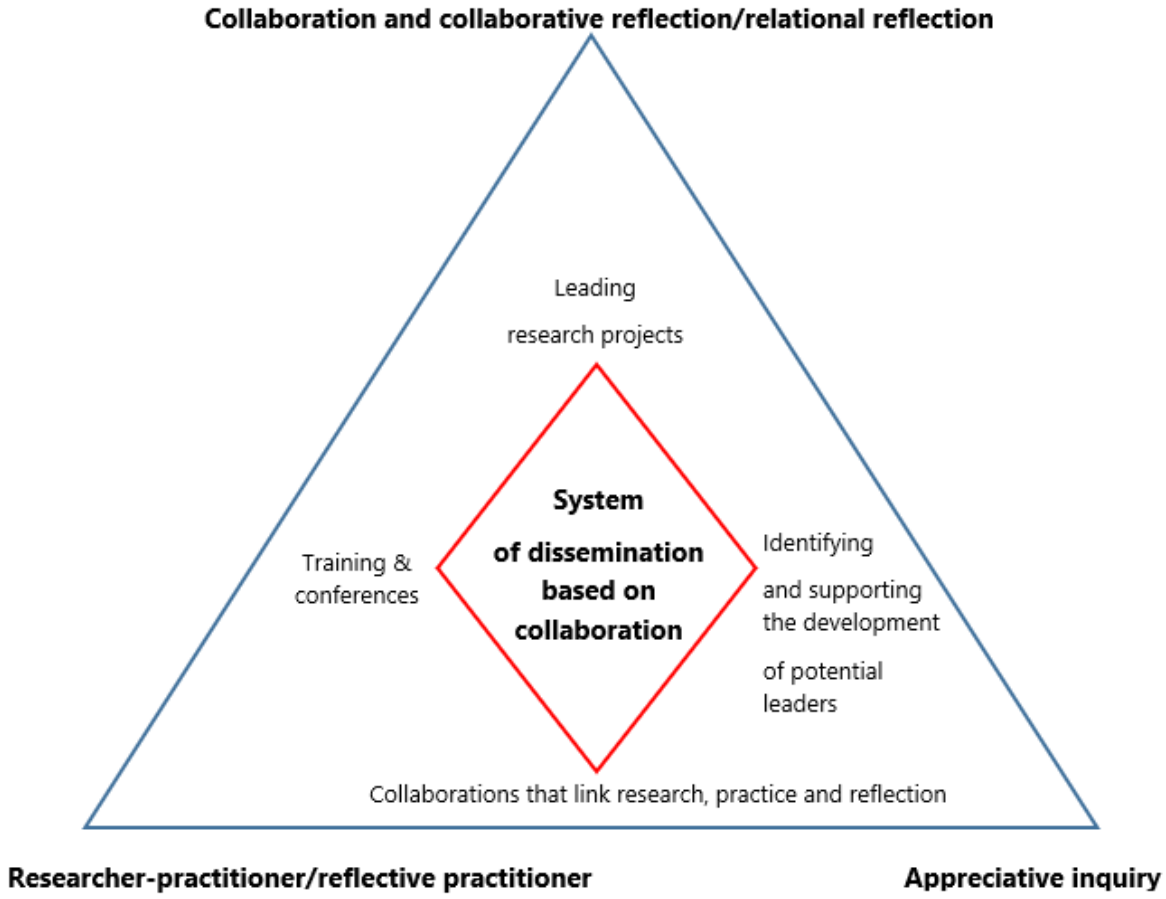

Figure 2. Diagram that crystallises the broader system of dissemination

The Public Works presented are clustered into three units. The first two Public Works are more substantial and are presented as distinct units, whilst the remaining Public Works presented were selected as they underpinned the emerging themes. The Up Skilling project and the EJCoP were not directly related to each other (before I started integrating them through the dissemination framework) and I wanted to give a sense to the reader, not only of the final outcome, but also of some of the earlier experiences and journey. Because these Public Works were substantial, I, at times, felt frustrated with their imperfections and, therefore, the appreciative inquiry framework has supported me to manage my own frustrations, emotionally build on the strengths and move on. The emphasis originates not from focusing on the imperfections but focusing on what has been achieved and building on the associated strengths.

4. The Up Skilling Research Project

In this section I start with the context of the project including how I was approached. I then focus on three themes: (a) leading research projects, (b) collaboration and collaborative reflection/relational reflection including collaboration and participation and (c) researcher-practitioner/reflective-practitioner including the enhancement of rigour through research processes. I then expand on further reflections including my learning from this.

4.1 Context

The “Up Skilling the Specialist Mental Health Workforce in Psychological Practice Skills” is a research project that was commissioned by the West Midlands Mental Health Institute. The focus of the research has been on competences and not professions so the framework is broadly relevant regardless of role or setting. This project directly relates to the Mental Health Institute Local Education and Training Committee (LETC) Workforce Development plan which represents a 5-year strategy for focused development of the West Midlands Mental Health and Learning Disability workforce. The plan has been driven by key service priorities identified through an iterative process undertaken by LETC members and it articulates the key workforce development needs arising from agreed priorities.

4.1.1 How I was Approached

My involvement in the project originated from my previous work as Regional Lead for the West Midlands for the National Audit for Psychological Therapies. In relation to the latter, I made a presentation at a conference of the Division of Clinical Psychology of the British Psychological Society, which was attended by Dr. Fletcher. She is based at the University of Birmingham, as well as the Coventry and Warwickshire Partnership Trust, which is one of the NHS Trusts in this region. The Chair of the West Midlands branch of the Division of Clinical Psychology recommended to Dr. Fletcher and her colleague Dr. Bond (who works in the same NHS organisation) that they approach me for this project. She highlighted my

relevant previous experience for the National Audit of Psychological Therapies. She also appreciated my experience of leading a subsequent research project on Clinical Governance and Accreditation of Psychological Services (which was sponsored by the Division of Clinical Psychology and its Faculty for Leadership). Dr. Fletcher and Dr. Bond were two of the senior researchers for this project and their expertise was inside knowledge of the organisation. I was appointed as the Research Consultant and Principal/Chief Investigator for the project, overseeing several postdoctoral, post masters and undergraduate researchers. I offered options appraisals regarding the research design and the scoping phase of the project.

4.2 Leading Research Projects

A key aspect of my leadership of this research project was the development of the dissemination strategy. The dissemination included presentations at conferences to, on one hand share our findings and learning to date and on the other, get feedback from the scientific committees but also, from other conference participants and attendees. I think it is important, in terms of dissemination, to classify conference presentations into different domains. One domain would be the multidisciplinary cross-profession domain and the other one is uni-professional. Examples of multi-disciplinary and cross-professional conferences we targeted included mental health conferences attended by a range of professionals, education conferences, NHS conferences, Patient and Public Involvement (PPI) conferences and methods specific conferences attended by a range of participants. In addition, we targeted uni-professional conferences such as education, psychology, nursing, psychiatry, occupational therapy, social work, health management and health economics. These conferences were spread across regional level (in terms of local feedback in relation to the regional focus of the project linked to the funding priorities) and national and international levels (in relation to the research methods). All of these presentations were tailored to that specific audience.

The dissemination strategy included a tool to help us identify where to submit articles for publication. This included factors such as publication fees, open access versus impact factor, speed of publication, link with chosen method or previous similar publications, geographical focus, scholarly breadth and journal focus.

Besides the above, the organisations own website and word of mouth were key dissemination avenues.

The dissemination policy interlinked with our stakeholder analysis and specified the following groups: service users, Acute and Community Mental Health Trusts, volunteers and independent sectors, Higher Education establishments, commissioners, Local Authorities and specialist professional groups (e.g. Division of Clinical Psychologists) at regional, national and international levels.

Brand building has also been raised as a key element. It was highlighted that a strong and recognisable brand would allow the project to build up an element of trust with the stakeholder and raises the project's profile.

4.3 Collaboration and Collaborative Reflection/Relational Reflection: Collaboration and Participation

West Midlands Coventry and Warwickshire Partnership Trust, was successful in a tender, but the stakeholders were much more than the staff and the service users of this Trust. The number of individual and organisation stakeholders has been much larger, potentially something in the region of 100 and 300 thousand stakeholders, because they fall under the following groups: all the other publicly funded hospitals and community treatment mental health services; all the private organisations and the not-for profit organisations or charities that provide mental health services; all the education providers, including those based at universities and including the doctorates in professional psychology but also courses in nursing, medicine and other related professions; representation from students; the commissioners of all of those programmes; the representatives and from the clinical

professional groupings and social care groupings (e.g. psychologists, social workers, nursing, medics); research and innovation departments, OD departments, recruitment and human resources and last but not least, the patients themselves, because there cannot be a separation of who is receiving the services and who we train.

4.4 Researcher-Practitioner/Reflective-Practitioner and Collaboration Including Collaborative Reflection/Relational Reflection: The Enhancement of Rigour Through Research Processes

The project included a number of literature reviews including “Improving patient outcomes: Effectively training healthcare staff in psychological practice skills- A mixed systematic literature review” (Garzonis, Wyrzykowska and Kanellakis, 2015) and a review of data quality assessment frameworks that led to “A framework to assess healthcare data quality” (Warwick, et al. 2015).

In all research, dissemination is linked to ethical standards. Moreover, one of the main criteria of quality in action research is that is linked to dissemination and adoption. In this project, part of dissemination is “dissemination for action” through engagement and participation in developing evidence-based learning and development modules. This was undertaken through action research delivered via convergent focus groups (as well as individual interviews) utilising Delphi consensus seeking methods; these groups included health care staff, volunteers and higher education representatives, several of which had been service users. These focus groups complimented earlier stakeholder engagement events in which the views of a range of stakeholders were taken into account in planning subsequent steps. In parallel, dissemination and stakeholder engagement included the formation of a steering group including the most senior academic and clinical representatives across health providers and training institutions from a range of professions.

4.5 Further Reflections: Learning From This

In this section, I further reflect on (a) Collaboration and collaborative reflection/relational reflection and (b) adaptations that I led whilst maintaining a collaborative stance

4.5.1 Collaboration and Collaborative Reflection/Relational Reflection

The project has managed to achieve the achievable elements. A lot of learning was gained by the many people who participated in the project. The harm reduction and management process (which I will describe in more detail later on) was key to come out of the project with a positive sense and continue future phases of the project. It is great that I now have the opportunity to compliment the smaller reflections cycles at the time with a larger cycle of reflection from a further distance. What gives me curiosity and delight is how to achieve excellence in milestone outcomes (without confusing this for perfection), how to support myself and others to expand reflection, how to enhance collaboration and how to share knowledge. On the other hand, what gives me anxiety is once again, the potentially perceived proximity between excellence and perfectionism and the risks associated with collaboration

When I am thinking of this project, the metaphor that comes to mind is that of building a hospital of great innovations and therefore, something that involves a lot of unknowns and risks. More specifically, the elements of an architect creating a specific design tailored for the people who own the hospital and those who will be staying (i.e. patients) and working in it (i.e. staff). Therefore, this design needs to be done in collaboration between the architect and the owners of the hospital, taking into account their budget, their specific circumstances (e.g. their mobility level, lifestyle, health and culture) and their preferences.

Collaboration also needs to take place with the regulatory authorities that oversee the building construction, taking into consideration the local and national regulatory framework. Therefore, the early stages of such construction focus on commissioning and

agreeing the design (with clauses about ongoing adaptations, taking into account the unknowns involved in the innovative nature of the building).

The above metaphor crystallises in my reflections both the magnitude of the project and the importance of having appropriate financial resources to the scope of the project and when there is a mismatch, either the budget increasing or the scope reducing. I realise that my experience adds to the conclusion of the NIHR Health Technology Assessment (2001) that a key challenge in action research in the English health service is inadequate funds for the successful completion of the projects.

On reflection, I believe that I learnt from my participation in this project that the three key action research elements for this project were: (a) the reflections, (b) the enhancing participation and collaboration and (c) the enhancement of rigour through research governance processes, on which I will elaborate below.

4.5.1.1 Reflection in Collaboration/Relational Reflection - In relation to reflection, I found useful the models of plan, act and observe, reflect and plan again, and intend, act, review and intend again. I like the simplicity of these models and I encouraged, through a range of my communications, that reflection forms an important aspect of the research process. Areas that this was used well were the reflective logs of each co-researcher and the strong reflective elements that emerged during the focus and Delphi groups. A key theme in these was the dismantling of the dichotomy between professionals and service users; a lot of participants were able to position themselves in both of those groups but this resulted in a confidentiality restriction in terms of what they were willing to be shared in a public document such as this doctorate. Nevertheless, small elements of those are included in the conference poster presentation made at the Glasgow Division of Clinical Psychology Conference in 2014.

4.5.1.2 Further Reflections on Enhancing Participation and Collaboration - The third of my top learnings is related to enhancing participation and collaboration with the range

and plethora of stakeholders. If a piece of research is going to have an impact, it needs to be done in collaboration with the key stakeholders, so that it is on the right path and focused on answering the questions that are meaningful to them, as well as ensuring that all of the data required is taken into account. This project was built on my previous learning regarding engaging and collaborating with others through convergent interviews and Delphi consensus seeking methods that I gained through my experience in leading the research project that was commissioned by the Division of Clinical Psychology (i.e. about accreditation of psychological services). However, this project took to new levels my experiential understanding of what it is like to select a collaborative method that depends on enhancing participation. Part of this learning is linked to the challenges in co-ordinating all those involved

The most valuable learning was the greater experiential understanding of what Dick (2014) was referring to in his writing about action research. For example, I learnt the benefit of concentrating on what seems, at the time, as the most important aspects of my relationships with my collaborators. For this, I found invaluable the utilisation of my own (external to the project) support team which included my own supervisors/consultants, to keep on reviewing my perception and understanding of the various elements as they unfolded over time. I agree with Dick that the investment in strengthening my working relationship with my collaborators so it can weather (through flexibility, openness and the trust developed) the issues that unavoidably arise. I also find humbling and reassuring his comments “It seems that there is almost never enough time to contract thoroughly. It is too difficult to anticipate everything that might happen. What I leave out returns later to make my life difficult… [And at the start] I can’t always tell what can be left out and what can’t…I don’t expect that I will always get this right…and every so often I still make mistakes in this important phase” (Dick, 2014, para. 14-17); they strengthen me to differentiate between excellence and perfectionism. I agree with him that in addition to initial relationship building and contracting, clarifying expectations, and negotiating

outputs, processes and roles. this needs to be repeated through several cycles. Similarly, I appreciate the importance of not only what is stated but also what is not.

Collaborative action research can bring up very strong emotions and therefore, the challenge for each one of us is to communicate as clearly as possible without criticisms, threats or demands.

4.5.1.3 The Enhancement of Rigour through Research Governance Processes (Further Reflections): Researcher-Practitioner including the Reflective-Practitioner Framework- A key question that I was asked since the early stages of my involvement in the project was whether we should treat this as research or not. First of all, it was commissioned as a research project and therefore, treating it as research was a necessity to ensure that the commissioners complied with the Research Governance Frameworks for Health and Social Care (2005) requirements. I strongly believed that treating it as research had a number of advantages that arose from the restrictions that came with such classification. I was mindful that the limitations that were associated with the restrictions could be counterbalanced by the flexibility that is provided by action research. Similarly, action research would not distract from action being taken as this is a key element of such a method. A research framework could enhance quality (including rigour) and the action research method would cultivate the elements of collaboration and dissemination as part of ethical practice. Treating this project as research has helped us to further engage other NHS Trusts (incl. Chief Executive level and Local Collaborator level) and thus, prepare the ground for adoption and dissemination of the findings.

In terms of enhancing the rigour through research governance processes, this primarily had two dimensions: online forms and interpersonal. An early decision was in relation to my advice that the project is treated as a research project. This resulted in us having to complete research approval forms which require addressing a number of standards, including engagement, consent (and making explicit how this could be withdrawn), quality of information and funding. The very process of completing these forms required further

reflection, as well as, debate between the project team and agreement in writing by the project manager. In this way clarity was enhanced to meet the benchmark set by independent auditors and finally, by the heads of research for each one of the organisations that participated in the scoping study that I led. Secondly, this process resulted in further engagement of those who had the responsibility to approve the research (i.e. heads of the research department of each organisation but also, the other members of the research committees that included representatives across the professional groups in each organisation from which local collaborators were identified, as well as the chief executives of each organisation).

4.5.2 Reflections on Adaptations that I led whilst Maintaining a Collaborative Stance

On reflection, I conclude that the three adaptations that I believe worked well in this project were the relational reflection logs, secondly, breaking down the divide between professionals, service users and carers and thirdly, the utilisation of a steering group.

4.5.2.1 Reflections on the Adaptations on the Intersection between Relational Reflective Logs and Breaking Down the Divide between Professionals, Service Users and Carers - A lot of the literature presents reflective logs of the researchers as primarily an intrapersonal activity. I have been very mindful of the emerging literature and good practice guidelines about enabling participation of service users, both in the context of emancipatory action research and service developments within clinical and counselling psychology, including in the training of Clinical and Counselling Psychologists. My early psychology experience placements included the Terence Higgins Trust, an organisation which was service user led. In contrast, I have experienced organisations that used, for consultations, service users as a Token and putting them in positions that undermined everyone’s credibility. On the other hand, I have worked very closely with the service user representative for the National Audit for Psychological Therapies, who subsequently was enrolled at the Manchester Clinical Psychology Doctorate. Similarly, in my role as research supervisor for the Clinical Psychology Doctorate at Canterbury Christ Church

University, I worked alongside people with lived experience of mental health problems who were trained at doctoral level. From such experiences, I have come to realise that meaningful participation of service users needs to go well beyond one or even two people with lived experience participating in a process led by professionals who do not have lived experiences, as otherwise this becomes Tokenism. I agree with Involve that service users need to be supported through increasing their skills and through the provision of the appropriate interpersonal support to be an equal colleague in research collaborations.

In this context, and considering the relational aspects of clinical and counselling psychology, I advocated that we experimented with reflective interviews between the researchers rather than reflective autobiographical logs. These interviews were also iterative in the sense that they did not just occur once off and earlier interviews developed latter interviews with the same people but also with other people. Subsequent interviews were advantaged by an increased sensitivity to issues of pacing, shame and confidentiality. This reminded me of the convergent interviewing methodological aspects of action research. Both the feedback from other people and my own experience emphasised the benefits of such an approach. Interviewees felt emotionally supported to unfold aspects that we were not able to acknowledge in isolation. It was a very humbling and moving experience. Moreover, what emerged was that the professionals were not exempt from experiencing ourselves psychological problems, on the contrary, our own experiences motivate us to work in this field and they form both our Achilles heel but also our strengths linked to inside and lived experience/expertise.

4.5.2.2 Reflections on Adaptations regarding the Utilisation of a Steering Group - The third adaptation was the inclusion of a steering group to enhance rigour and participation. This group included the Heads of the Clinical Psychology Doctorates in the region but also, Professors of other professions (e.g. Nursing) and Director-level Professional Leads (e.g. Medical Director and Director of Psychological Services) representing the NHS Trusts and other service providers across the West Midlands. On

reflection, I realise that this group needed to be a significantly large group to enable networking as a foundation for collaboration. Although the size of this group enabled information sharing and some action planning, as well as enough co-ownership, it made the collaborative reflective elements smaller. Therefore, I have found that relational reflections are mostly enabled in very small groups or even dyads, which I have used, as explained in other sections. However, the steering group met its objective of enhancing rigour through participation and action planning.

5. The European Journal of Counselling Psychology Project

In this section, I elaborate on the themes of: researcher-practitioner including the reflective-practitioner framework; collaboration and collaborative reflection/relational reflection; appreciative inquiry on a foundation of collaboration and identifying and supporting the development of potential leaders. In addition, in this larger section compared to the earlier one, I plan to contrast and compare how this public work is similar and different to the Up Skilling one (i.e. Public Work 1).

5.1 Researcher-Practitioner including the Reflective-Practitioner Framework

In the introduction of this thesis, I have highlighted the significance of the researcher-practitioner (including the reflective-practitioner) framework for clinical and counselling psychology. Through the development of my strategic capabilities during my director level training at the NHS Institute of Innovation and Improvement, I realised that without evidence-based innovation and developments that strengthen the link between research and practice disciplines can easily become outdated and perish. Moreover, as Coghlan (2010) advocates research should be focusing on what is meaningful, relevant and important for practitioners, whilst practice needs to use the relevant research findings.

In 2007, I founded the European Association of Counselling Psychology (EACP) with the aim of supporting the development and application of Counselling Psychology across Europe. Full and Associate members are long-term residents of any European country or have completed accredited counselling psychology training in any European country, although Affiliate members can be anyone who is willing to support the EACP's mission. Though I am based in the UK, my psychological roots and locations of upbringing, studying and working have been European and the Association mirrors this. As I briefly

mentioned in the positioning statement and will expand in a subsequent dissemination section, I have been very influenced by the strengths that can be gained through cross national collaboration through my own experiences of living and working across national borders. In addition, I have been very influenced by my experiences of particular projects and initiatives (like the globalisation project, which I will explain in greater detail in the subsequent broader system of dissemination section). However, soon I realised that the Association and the surviving, if not thriving, of the discipline beyond national borders required a solid and current evidence-base, drawing upon the researcher-practitioner framework of counselling psychology shared with its sibling discipline of clinical psychology.

On the basis of the above, in 2009 I founded the European Journal of Counselling Psychology (EJCoP) and led its development since then. Its mission is to strengthen the adoption of the researcher-practitioner model and innovation in line with the doctoral level competencies for Counselling Psychologists. My vision for the journal is that it links the knowledge of counselling psychology across national borders and positioned it at the forefront of innovative evidence-based practice.

Through my experiences as a trainer and supervisor, I came to the conclusion that the gap between practice and evidence-based theories is at least partly linked to the difficulties associated with reflection and this highlights the importance of the reflective-practitioner framework. As highlighted in the Methods section of this thesis, I am coming to a deeper appreciation of the benefits of action research for counselling (and clinical) psychology, because of its emphasis on various spirals of reflection. Action research can help Clinical and Counselling Psychologists to link research and practice in a methodologically sound way that also takes into account the specifics of practice. I have been keen on the EJCoP being integrative and comprehensive in its approach. It publishes high quality research from different epistemological, methodological, theoretical and cultural perspectives and from different regions, providing a forum of innovation and

debate, and questioning and testing of assumptions. The EJCoP aims to bridge academic and applied counselling psychology. It tends to transcend the methodological and meta-theoretical divisions. The Journal welcomes submissions from both quantitative and qualitative methods, including ethnographic, autobiographical, and single patient or organisational case studies.

As highlighted in the methods section of this thesis, action research is also linked with appreciative inquiry. Again, this is a method (or umbrella of methods) particularly relevant to counselling psychology so that there is fostering of the morale of those who do their best to link counselling psychology research and practice. Publications can be seen as celebrations of what works or even developing insight about what does not work, which is an achievement in itself.

I have been mindful that the researcher-practitioner framework is one that is mostly adopted in the UK, where counselling psychology is more established in relation to other European countries. Nevertheless, the researcher-practitioner framework values diversity and enables tailor made solutions that correspond with the specifics of each situation. Therefore, counselling psychology across Europe cannot be based on UK research only. On the other hand, UK research and practice can benefit from research and practice links in other European countries but also from cross national collaborations. The same applies to European research and practice in the field of counselling psychology. The EJCoP publishes articles at the intersection of European and counselling psychology issues that substantially advance the understanding of professional issues, the training of Counselling Psychologists and the application and practice of counselling psychology across Europe.

This theme is closely linked to the theme of collaboration linking research, practice and reflection that is presented under Public Works 3.

5.2 Collaboration and Collaborative Reflection/Relational Reflection

Like any similar project, the EJCoP, as a vehicle of dissemination, relies on the collaboration between different people and is not something that can be done by one person, therefore, it relies on collaboration through its systems with peer reviewers, Guest Editors, authors and targeted readership. Such collaboration includes elements of mentoring of the development of self and the Journal. Collaboration also balances sufficient homogeneity to maintain a coherent focus with diversity amongst people (rather than multiple copies of one person with a single set of experiences and strengths). The Journal relies on distinct roles between authors, peer reviewers and the editorial team for each of the articles (although for different papers the same people can hold different roles, i.e. for one paper someone can be an author and for another paper someone can be a peer reviewer).

As highlighted in the Methods section, I am keen on utilising the opportunity of this context statement to do a broader reflection (as part of the blend of ongoing narrower and broader spirals of reflection and planning) to guide the future direction of the Journal. Therefore, there is a similarity between the larger picture reflection that I undertook in the previous section, in which I focused on the Up Skilling project. I am utilising the relational tools of action research and appreciative inquiry perspective in the sense of primarily focusing and building on strengths as a way of identifying future direction. For example, it seems important to acknowledge the amazing achievement of publishing several volumes and issues. The difference with this Public Work, in relation to the Up Skilling one, is that I am still very active with the EJCoP and therefore, the potential to directly influence the future direction seems easier to identify.

When comparing the EJCoP with the Up Skilling project, the former is much more than a specific research project. This will become clearer in the subsequent sections when the reader learns more about the connections with the EJCoP but also with the Broader

System of Dissemination, which interacts with collaborative creativity and the researcher-practitioner framework.

I believe that it is significant that I am still very visibly at the helm of the EJCoP. Therefore, the choices that I am faced with (whether I make those in isolation or preferably, in collaboration) include: at what point and how do I share the position at the helm; how I think about succession planning; when and how do I step back; how I work with others so that we reach optimal direction taking into account the likely circumstances of the future. All of these decisions need to serve the objectives of the Journal and, therefore, the dissemination work of the Journal. I have found that reflective conversations that I have had, as the person in the leadership position, with other people on those dilemmas of mine were invaluable in clarifying my passion for collaboration. I have come to appreciate how leadership and collaboration are compatible terms. Connected to this is my valuing of diversity and identifying strengths in others, as well as the dissemination of the researcher-practitioner framework (including the reflective-practitioner one). Throughout this reflection thesis I give examples of how I have been collaborating with others, so that the plan of action also takes into account their questions, but also feedback and sharing of information regarding changes of the circumstances, both in the immediate and broader horizons. A lot of this is confidential and is given on the basis of the trusting relationship. I have also been regularly checking to what extent my understanding fits with what my collaborators are intending through conversations with, and broader feedback from, the Senior Editorial Assistant, the Editorial Assistant, the liaison person with PsychOpen, the authors, the reviewers and the Guest Editors.

5.3 Appreciative Inquiry on a Foundation of Collaboration and Identifying and Supporting the Development of Potential Leaders

Being at the helm involves delegation, especially when the objectives include as broad dissemination as possible. At the same time, delegation for me can be based upon a framework of collaboration.

Delegating whilst supporting people with the delegation has significantly generated energy for change. At the same time, I feel passionate about diversity of interests, as well as perspectives. Supporting also meant knowing when to exercise the Editor in Chief's decision-making, whilst valuing diversity. Delegating is closely linked to collaboration when I am structurally in the position of leading projects and, therefore, is a similarity between the Up Skilling project (Public Work 1) and the EJCoP. When I reflect on the examples that could illustrate the delegation to Editorial Assistants, I feel overwhelmed and somewhat paralysed by these. What comes to my mind is the image of a cluster of individual components (e.g. fish) in which the whole dominates the perception of the viewer. I appreciate that this sheds light on the critical function of such delegation without which it would be impossible for the project to exist. At the same time, I appreciate that focusing on the most recent meeting is a way to identify some illustrations; the minutes of the meetings are a source of data, as well as a forum of reflection on what is working well and problem solving regarding what is outstanding. In that meeting between me (as the Editor in Chief), the Senior Editorial Assistant and the Editorial Assistant, several tasks were delegated including: checking the formatting of submitted papers; compiling the comments from reviewers; checking whether the authors have made the requested revisions to their submissions; drafting emails (including to the liaison person of the publishing platform; Guest Editors; potential Guest Editors and Reviewers).

The delegation not only makes the role of the editor in chief manageable, but also facilitates the development of the editorial assistants. Such development relates to their know-how but also to collaborative reflection, linking theory, research and practice in clinical and counselling psychology, as practiced from moment to moment by every one of us. The Senior Editorial Assistant is supported to develop her skills in overseeing the work of others, within the framework of appreciative inquiry and positive reinforcement of reflective practice. At the same time, the Editorial Assistant, is not only developing her knowledge and experience, but is also creating a reflective account of her learning and what has been energising her. She will submit this for partial fulfilment of her Bachelors

module requirement for placements, as well as an article for the professional journal's main publication (i.e. The Psychologist). Therefore, the collaboration with the Editorial Assistant builds upon and reinforces (in a forward spiral way) the collaboration with her university. In this context, the university has subsequently expressed its interest in the Journal providing further placements not only in the field of psychology, but also behavioural sciences in general. This fits well with the mutual appreciation of diversity. The collaboration between the central editorial team has ripple effects that spread very broadly. For example, the Senior Editorial Assistant has nurtured my previous collaborations with the University of Wolverhampton Doctorate in Counselling Psychology (where I have taught). When she applied for a place in this Doctorate programme, she highlighted the work of the Journal to the faculty who were involved with the selection of candidates. In my subsequent reference, within the appreciative inquiry framework, I highlighted our collaboration in the context of the Journal and this added to the dissemination regarding the Journal. Furthermore, we have planned for the Senior Editorial Assistant to act as an Ambassador for the Journal and the Association at that university when she commences in autumn, building on her strengths. Similarly, I was delighted when a final year student at the Glasgow Caledonian University Doctorate in Counselling Psychology, whose paper met the peer review and publication standards, accepted to also act as an Ambassador for the Journal and the Association at that university. This led to her becoming more involved with the central editorial team.

I see developing others as closely linked to both collaboration and dissemination for the benefit of enhancing the field. An example of this is a workshop that I conducted at the 2015 International Congress on Clinical and Counselling Psychology, for which I have received very positive feedback. In connection with this workshop, I reflected with the participants on our strengths and we encouraged and learned from each other. After inviting the sharing of their experiences, I also shared with them my experiences as Associate Editor of Europe's Journal of Psychology, Editor in Chief for the European Journal of Counselling Psychology (EJCoP) and peer reviewer for several journals. I also

fostered the reflection-planning-action spirals by encouraging the participants to develop some plans at the end of the workshop, which I followed up with them through subsequent email correspondence. I have found this exercise to deepen collaboration and reflection, as well as the link between research and practice. All of the above might not have happened without working in collaboration with colleagues in the field and collaboratively facilitating reflection in others (such as the Director of Future Academy), building on appreciation of their strengths and linking research and practice.

Reflecting on the similarities and differences between the EJCoP and the Up Skilling project, what seems key is the similarity in supporting the development of others with whom I have been collaborating. Again, this was done through collaborative reflection about what would best meet the project needs but also the individuals' aspirations and strengths. This collaborative reflection took the form of regular discussions that commenced at the earliest point of collaborations. These discussions addressed what individuals perceived as their personal shorter and longer-term goals, as well as their strengths, on which I built by cross-referencing with my own perception about their strengths and potential contributions to the project. In this way, my collaborators would benefit as individuals but also the project that I was leading would thrive in a way that would not have been possible without such collaborations.

Collaboration exists on several dimensions and in that regard, is even more intricate than a spider's web. On the simplest level, the EJCoP provides a platform that supports collaborations of authors. Several articles have more than one author and I have always encouraged synergetic creation rather than individualistic value sets (I will reflect on the different value sets in Public Works 3). I see this linked to relational reflection. An example of this is when I invited an Irish Counselling Psychologist to submit a paper reflecting upon her paper that is one of the most cited counselling psychology papers in the international Counselling Psychology Quarterly Journal (see Baird and Kracen, 2006). I encouraged that she did this in collaboration with the second author and offered to reflect, with both of

them, on how the autoethnographic research method could, firstly, apply to counselling psychology, but also to collaborations, rather than life journeys of individuals. On reflection, this presents a similarity between these collaborative reflections and the reflective interviews between the researchers rather than reflective autobiographical logs.

Collaborations between the editorial team and authors are an important element of the published outputs. The key criteria that I have developed for the initial editorial screening of articles (i.e. before they reach the stage of blind peer review) include adherence to the scope of the Journal, which emphasises collaboration and cross fertilisation of ideas and good practice in counselling psychology across Europe and beyond. I have shared those with the editorial assistants and senior editorial assistants, so that they embed them in their practice for the initial editorial screening of articles. I see a similarity between the collaboration of the editorial team and authors and my advocating for challenging public divides between professionals and people with lived experiences of psychological problems that I described in the Up Skilling project.

I realise that the relationship between the Journal's authors and readers is more forward spiral-like than what is initially visible. For example, authors who submit their work to the Journal often read past articles published in the journal. This happens both at the pre-submission stage and when they re-draft their paper, in light of the review feedback. This feedback often focuses on authors reflecting on how their own work is similar or different to other counselling psychology articles across Europe. It also focuses on implications of their research to future practice (in line with the researcher-practitioner framework) and further research across Europe. Although the authors are not restricted to the reading of the articles of the EJCoP, this Journal is the only journal that is free to both publish and read. Therefore, it removes financial obstacles in readers and authors of articles regarding broad dissemination of research in this field.

The European theme is also supported by the collaboration with the publishing platform, PsychOpen. PsychOpen is key to our dissemination as, due to a German government

grant and in collaboration with the Leibniz Institute for Psychology Information, as well as the voluntary work of all of the editorial team, we need not charge authors for publishing and readers for accessing the journal papers. Moreover, PsychOpen and the staff at Leibniz Institute provide the central editorial team of the journal stimulus for reflection regarding plans for the future. An example of this is our upcoming immediate dissemination of each article that reaches the publication standards rather than waiting for the release of the next issue. PsychOpen also have been providing an external quality assurance, which has helped the credibility of the Journal. All of the above have helped with progress regarding indexing the Journal and its articles with databases, such as EBSCO. Therefore, the collaborative relationship with PsychOpen and how this is maintained and enhanced has been the focus of several mini spirals of reflection. For example, analysis of the communications with PsychOpen has identified that regular updates from the EJCoP central editorial team and even requests for guidance seems to be the key predictor of our positive interactions. When we have experimented with improving this, we noticed an improvement in the relationship with PsychOpen. Whilst we considered alternative explanations, feedback from PsychOpen confirms the importance of regular communication focusing on strengths and options regarding the future.

The development of the Journal has also been based on collaboration with identifying all of the high-profile Counselling Psychologists across Europe, including those in professorial positions and gaining their backing. I approached them personally to gain their agreement to participate in the Journal's advisory editorial board, building on my previous collaborations with them. Gaining their support in writing was a key milestone for acceptance on PsychOpen. Similar networking and strategic achievements were made when I gained the agreement of the Editor in Chief of the international journal of counselling psychology with the highest impact factor (as well as being the most highly cited Counselling Psychologist in the world according to Google Scholar) to act as Consulting Editor, mentoring me. I found useful the questions that he has been asking me, in what I experienced as relational reflection. These help me to identify my priorities and

vision as the Editor in Chief of the Journal. For example, I appreciated, even deeper, my commitment to the researcher-practitioner and reflective-practitioner frameworks, valuing diversity (in appreciating a range of strengths) and dissemination. His support has included him publishing some of his and his students' work in the EJCoP. This inspired me to approach all of the other highly cited Counselling Psychologists and engage in collaborative reflections on how autoethnography could be applied to counselling psychology to help disseminate their wisdom on how to maximise dissemination of counselling psychology research findings, so that they impact both future research and practice. On reflection, I see a similarity between me taking opportunities to reflect with him and to reflect with Dick in relation to action research that started from his international course. Both of those reflections share the theme of collaborative reflection/relational reflection.

Collaboration, dissemination, reflection on the links between research and practice and appreciative inquiry are also linked with the blind peer review processes of the Journal. These are based on collaboration between the peer reviewers and the central editorial team of the Journal. The central editorial team not only facilitates the recruitment of peer reviewers (which is often based on previous collaborations but also builds future collaborations) but also synthesises, with my support, the diverse feedback from various peer reviewers for each article. A significant dimension of collaboration is also linked to supporting peer reviewers with giving feedback to the authors in a collaborative language (I conceptualise this as language that is respectful of difference, identifies strengths and shares options regarding improvements in the future); this has been identified as a particular strength of mine by Dr. Davies. Peer reviewers also develop through noticing how the published version of a paper, that they have reviewed, has evolved.

In addition to this, Counselling Psychologists participate in the Journal as authors, peer reviewers or members of the editorial team. This participation changes them through their participation, in that they develop for themselves as well as for others (through this

process) a tighter link between counselling psychology theory, research and practice, as this is enhanced by the interactions of these components (i.e. theory, research and practice in counselling psychology). I have also experienced this process in my own development. Therefore, all these are different facets of dissemination as a process as well as objective (e.g. publication of journal issues) and human (changes in the counselling psychology collaborators) outcomes.

I have been reflecting on the significance that the journal is based on everyone's voluntary work. I appreciate how such voluntary work has brought together everyone involved and provoked creativity that might not have happened if we had all of these as part of a paid employment. The hard work and emotional support across the core editorial team including the Senior Editorial Assistants, Associate editor and Editorial Assistants has been invaluable. In addition, a number of Guest Editors have agreed to support the Journal through their efforts and their local networks; similarly, a number of peer reviewers have invested a lot of energy and time to support this collaborative project.

I believe that the most courageous aspects from everyone involved in this project have been the trust and generosity in terms of energy and time in collaborating and supporting each other. Without this, the project would not have taken off or, if it had, would have soon crashed. I believe that it takes courage to trust that one would not be worse off by giving (at least in the long term or the broadest sense), as well as trusting one another to provide support when needed. This collaborative relationship building is also an underpinning dimension of knowledge dissemination; if this project had not happened, counselling psychology would have been weaker due to a larger gap between researchers and practitioners, much more insular and less prominent across Europe with weaker foundations for further developments involving cross fertilisation between people. Such cross fertilisation involves enhancement of knowledge through the collaboration of authors with the peer reviewers and the editorial team (often the final version of the papers is markedly different than the original submissions).

It feels important to also acknowledge some of the areas attempted or trialled but will not be further pursued in the foreseeable future, in line with the guidance of Coghlan (2010). Examples of those areas are publishing the Journal as a stand-alone project that is without the collaboration of PsychOpen or a similar platform, publishing a special issue focusing on the research of the most prominent Counselling Psychologists in the UK and publishing special issues focusing on counselling psychology research in Malta and Ireland. The rationale regarding the first example is detailed in earlier sections, in which I highlight the benefits gained from all of the energy and time invested in the collaboration with PsychOpen. The rationale regarding the other two examples is linked to the principle of working with what is emerging as a strength and opportunities for collaboration (and shelving the alternatives) rather than pushing fixed ideas irrespective of what others also find as energising and exhilarating.

In terms of the future, following the reflections above, the key projects that are most promising include the development of special issues for recent advancements in counselling psychology (with a particular emphasis on what would support doctoral training of researcher-practitioner Counselling Psychologists) in Greece, Portugal and Cyprus. A longer-term project is the indexing by Scopus and other high-profile indexing research databases that the Journal has not yet been indexed with. These projects are in line with identified strengths in the emerging collaborations of the journal (e.g. in relation to Guest Editors and national associations) and the theme of ongoing enhancement of dissemination.

5.4 Identifying and Supporting the Development of Potential Leaders

Collaborative and development processes also happen with Guest Editors, whom I ask to initially act as peer reviewers, as part of a programme of developing their expertise. This contributes to how the Journal goes about developing the community of inquiry of psychologists as underpinned by the notion of relational reflection in the context of the

peer review process and the role of Guest Editors. An example of this is the support of the Director of Future Academy, regarding the International Congress of Clinical and Counselling Psychology, who acted as a Guest Editor with a collection of the strongest papers related to European counselling psychology. In Public Works 3, I will describe in more detail how collaboration and appreciation of strengths also involved supporting him through the outstanding contribution award of the European Association of Counselling Psychology (EACP) and in collaboration with the Association of Psychological Therapies (APT, Kanellakis et al., 2015). A more recent example is the appointment of another Guest Editor (Dr. Sónia Matos Machado), whom I met at the 2015 Multi-disciplinary Conference integrating the 2015 International Congress on Clinical & Counselling Psychology and the 2015 International Conference on Education & Educational Psychology, which I co-Chaired. I appreciated her strengths in making connections between research and practice (in line with the researcher-practitioner framework) and being able to value both high standards and diversity in how these are met.

Through this process of developing Guest Editors, I have also been identifying and appreciating the strengths of another Guest Editor, who was initially promoted to the position of Associate Editor. More recently, I have appreciated his contributions to European counselling psychology, both in terms of his role for the journal but also as the Chair of The Division of Counselling Psychology of the Hellenic Psychological Society to promote the researcher-practitioner framework of counselling psychology to doctoral standards. I expressed such appreciation through the outstanding contribution award of the European Association of Counselling Psychology (EACP) and in collaboration with the Association of Psychological Therapies (APT).

In parallel to my exposure to the appreciative inquiry and positive reinforcement frameworks, I gained valuable experience in the constructive power of awards in my role as the Regional Lead for the West Midlands for the National Audit for Psychological Therapies (NAPT). The NAPT awards provided a useful motivational tool for reflection and

forward planning. It was a great delight that Inclusion Matters Liverpool by South Staffordshire and Shropshire NHS Foundation Trust (which was a service that I supported in my role as Regional Lead) was a joint first place winner for Quality Improvement. Subsequently, I have reflected on the awards that I launched as the founding registrar of the European Association of Counselling Psychology, which have acted as a way of reinforcing the researcher-practitioner and reflective-practitioner frameworks within counselling psychology. Recipients of these awards include: the founder of the first practitioner doctorate in counselling psychology in the UK; the founder of the first practitioner doctorate in counselling psychology in Ireland; the past Chair of the Counselling Psychology Division of The Hellenic Psychological Society for overseeing of the first doctorates in counselling psychology in Greece and the organiser of the International Congresses on Clinical and Counselling Psychology, which have taken place in Europe. In my reflections, I have been influenced by Dweck's work (2012), which synthesises research that advocates the reward of effort, strategy and progress rather than outputs. Extensive research data shows how praise of the former rather than the latter can be more constructive both for the individual and for others both when working with individuals and with organisations.

The more recent EACP awards have been given to younger Counselling Psychologists, who have been working tirelessly to advance, over many years, the link between research and practice in counselling psychology. The award came with an acknowledgement that it will hopefully support them in fully utilising their potential. Therefore, it is an expression of both encouragement and incentive, as well as appreciation of their strengths.

6. Bringing Together Other Public Works /A Web of Public Works that Illustrate the Dissemination Model

6.1 General Introductory Reflective Comments

My research activities such as the ones linked to the Up Skilling project and the European Journal of Counselling Psychology are connected to a broader system of dissemination of new knowledge. As part of my thesis, I would like to consider several other components that form that system i.e. (a) leading research projects, (b) identifying and supporting the development of potential leaders, (c) training and conferences, (d) collaborations that link research, practice and reflection and (e) appreciative inquiry. The remaining Public Works that I reflect upon are linked to more than one of those themes at a time; this is what unifies them to a whole. Nevertheless, I present them under the various subheadings and acknowledge overlaps with other themes.

6.2 Leading Research Projects

In this section, I focus on two other examples of leading research projects besides that of the Up Skilling one that I have already detailed in a previous section. These are the “Public perception of the professional titles used within psychological services” (Kanellakis and D’Aubyn, 2010) project and the Delphi Consensus-seeking project regarding the revision of the guidance for the use of National Assessors in the appointment of Consultant Psychologists (Kanellakis et al., 2016).

I consider my collaboration and leadership regarding the “Public perception of the professional titles used within psychological services” project an important milestone in my work. I invested a lot of energy and time in this project as it is partly linked to my passion about enhancing professional standards and ensuring that regulations do not become

bureaucratic obstacles that are not based on research. Moreover, this project was bridging the gap between professionals and service users. Although professional training standards are related to safe practice, the purpose of the statutory regulators for HCPC is to protect the public, not the interests of the professional groups they are regulating (Crown Copyright 2002). It seemed a logical conclusion to me that such debates need to be informed by public opinion as well as guidance from the professional bodies implicated. Up to that point, however, no research on related public opinion was published. Therefore, this research addressed the need for empirical evidence regarding the public's opinion on this matter. However, I set myself objectives on multiple levels in relation to this project. This public work in the form of a paper, which was published in a peer reviewed journal was based on a large-scale interview data set from 450 participants across 57 UK district codes. Age, gender and education for sampling purposes were monitored. This required a high level of ongoing cycles of reflection and planning to ensure that subsequent stages of participant recruitment took into account the characteristics of participants to date, valuing diversity. On reflection, I believe that a key part of my leadership was developing the vision and initiating this project through seeking collaborators for its implementation.

This theme is further illustrated by the Public Works in the subsequent section.

6.3 Identifying and Supporting the Development of Leadership Potential

In this section, I reflect on how the theme of identifying and supporting the leadership potential not only on The Public Perception of the Professional Titles used within Psychological Services project but also in relation to my role as National Assessor.

The Public Perception of the Professional Titles used within Psychological Services project also involved the recruitment of 16 interviewers. The project objectives included putting in place a research skills and development programme to build on the strengths the interviewers and collaborators brought with them to the project.

In a project of such magnitude there were several things that did not go according to plan for example enough data within the time framework that we needed to work within in order to achieve the objective of submitting this also to the HCPC so that it influences their decision making. That said, collaborators showed resilience, perseverance, and a willingness to learn regarding how to translate a vision into completion of a research project.

I have reflected on alternative attributions that could explain what worked well in this project. The alternative that I identified was that of collaborators doing all the work and me taking credit for it which could be linked to an alternative attribution of the collaborators already being in possession of all the knowledge and skills required. However, such an alternative attribution is not supported by the research processes undertaken. In the same time line as all the other interviewers I conducted 23 interviews. Many of these were on the same site and so I had the opportunity to observe and have oversight of the interview data generation processes. An alternative attribution could be that my learning was being supported by my interview colleagues; however, whilst the principle of collaboration is based on learning from all collaborators, I have had significant more experience than the group of interviewers in data gathering (including my Masters of Science) and interviewing people building on my clinical skills, as well as my related data analysis experience. In any case, challenging the alternative attribution is based on who made the contributions; this is often a requirement of editors for publication and in particular for negotiating first author. Also, the way that the project was structured and run involved a clear appreciation that this is a project that I envisaged and was the primary leader of, taking into account my initiation of the project based on my vision of it and the agreement that all aspects needed to be approved by me.

I have also considered the alternative attribution of me acting as a catalyst and no more than that. Although the being with catalytic component of my collaborations might fit with some clinical and counselling psychology frameworks, I do not have sufficient evidence to

support this alternative attribution. I will return to the potential significance of being with in the subsequent section in which I reflect on all of the themes across my Public Works presented in this thesis.

The theme of identifying and supporting the development of leadership potential is also present in my work for BPS National Assessors. The BPS is supporting provider organisations of health and social care services through the provision of such assessors to support the successful appointments of Consultant Psychologists. Clinical governance and high professional standards are maintained when appointing for Consultant Psychologist posts through the use of National Assessors. Psychological leadership has a key function to achieve this combination of efficiency and effectiveness including safety, innovation and service development.

I have taken forward the themes of working with others, appreciating and cultivating their strengths through my work initially as a National Assessor for the Appointment of Clinical and Counselling Consultant Psychologists in Health and Social Care and subsequently, as a Lead National Assessor.

This is linked to the following Public Works: (a) The Appointment of Consultant Psychologists: Guidance on using National Assessors for the quality assurance of appointments and clinical governance of psychological practice (revised, Kanellakis et al., 2016); (b) Defining Primary Care Psychology in the Present and for the Future (Wood, Kanellakis & Monk, 2014) and (c) Reflecting on involvement in updating the internal and external guidelines for National Assessors (Mann and Kanellakis, 2016).

In my role as Lead National Assessor, again on a voluntary capacity, I have also led a collaborative project utilising the Delphi consensus seeking methods and the action research reflection frameworks proposed by Coghlan (2010). The focus of the project was the updating of the internal guidelines to National Assessors and the outward facing

document regarding the use of National Assessors. The external guideline on the use of National Assessors was updated to support organisations to understand the benefits of using National Assessors when recruiting Consultant Applied Psychologists. Both documents incorporated relevant information from essential policies including the Agenda for Change (A4C) and ensured that information was up to date with HCPC regulations. The Delphi methodological framework recommends for there to be a fourth round of consultation to allow respondents to revise their judgments. Although this was not an explicit stage of the process, there was on-going communication through emails to encourage participation and all National Assessors were invited to review their comments (which had been documented anonymously) during the third round of consultation. This ensured that responses provided were stable.

A frequent example is the topic of how to persuade all staff that training in basic psychological skills would help in their work; these discussions have been also advancing my parallel work on the Up Skilling project, that I have described in the earlier section. The objectives of the Up Skilling project were to disseminate the importance of training all staff in basic psychological skills to help them in their work and for that to be a spiral process of collecting information about the various organisations and disseminating the findings on an ongoing basis.

In the revised guidelines, I paid particular attention to the importance of the responsibility for research and development held by Consultant Clinical and Counselling Psychologists, drawing on the researcher-practitioner model. National Assessors can communicate strong messages to both candidates for consultant positions and other senior employees in Health and Care organisations, who are part of selection panels for such positions. Questions that we included in the guidelines such as “what research are you currently doing and please describe the methods and the sources of funding that you are currently utilising” (no pagination) and “please tell us more about your latest publications and how they fit in the dissemination strategy of your research” (no pagination) invite collaborative

reflection. At the same time, it is acknowledged that the role of a Consultant Clinical or Counselling Psychologist largely entails “judgements involving highly complex facts or situations, which require the analysis, interpretation and comparison of a range of options” (Kanellakis et al., 2016, p. 21). The job analysis documents highlight that highly complex refers to:

> “Complicated and made up of several components, which may be conflicting and where expert opinion differs or some information is unavailable. This type of analysis and judgement may be required in posts where the jobholders are themselves experts in their field and judgements have to be made about situations which may have unique characteristics and where there are a number of complicated aspects to take into account which do not have obvious solutions.”

Such judgement skills are paralleled with complex planning and high-level organisation that require ongoing adjustments of strategies, drawing up on the reflection-planning-doing framework of action research. In relation to not only planning and service development but also dissemination, an essential aspect of the role of Consultant Clinical and Counselling Psychologists is to go beyond influencing the person’s own service. They also need to influence others outside of the person’s own area of activity, engaging a range of stakeholders (including people with lived experiences of psychological disabilities and of services that aim to support them). The very role of being a National Assessor has provided me with the opportunity to exercise such influence. I have been doing this on two levels. Firstly, I have been mindful of the questions mentioned above, in relation to research and development, to ensure that strong candidates in these areas are appointed to these roles. Secondly, I have been aware of a meta-level, on which I have been inviting collaborative reflections with all of the candidates interviewed and, outside the interviews themselves, with my fellow members of the selection panels. Therefore, we have been sending a strong, supportive message to unsuccessful candidates who, as a result of

participating in the selection process, deepen their understanding of the importance of the researcher-practitioner framework and the associated competencies that I have described above. We explored their strengths and how these could be developed to enhance dissemination and the link between research and practice, valuing diversity, whilst, at the same time, enhancing standards and practice.

Similarly, the related discussions that I have been having with my fellow panel members deepen and expand their awareness regarding the importance of these dimensions for the Consultant Clinical and Counselling Psychologist role. They also update and deepen my own knowledge of the challenges and opportunities that different organisations in Health and Social Care across the UK face. These collaborative reflections have been focusing on how we ensure developments that permeate to other services that one does not directly manage but may be able to influence.

In my role as Lead National Assessor, I led, on a voluntary capacity, a piece of collaborative research that aimed to bridge the gap between evidence and whether Primary Care psychology is a specialism worth maintaining in the professional governance structures. Without a clear view of how Primary Care is understood, it will be difficult to provide appropriate guidance on whether staff have the necessary competencies to meet the demands of the post, as well as maintain high standards for the future (British Psychological Society, 2008). I identified the need to examine to people's current understanding of Primary Care, and how they think it may change in five years' time. Moreover, given that people working within Primary Care may understand it differently to those outside it, and that different professions may also see it in various ways, we sought the views of a range of people. By understanding better how they define the term, we hoped that we can build a working definition and shared comprehension of Primary Care that can inform the scope for change in the future. Primary Care, for something termed “the foundation of NHS care” (NHS England, 2014), is surprisingly ill-

defined. This difficulty may relate to the absence of a strong evidence-base on how best to structure it.

Through this research, even as we established a shared operational definition, we also considered it within the context of future revisions and how it might change. The definition concluded by this UK paper has more in common with that used by the World Health Organisation (1978), having many of the same aspects, such as universal access, essential health care, and a community base. A crucial difference between other publications on the same topic and our research is the absence, in our findings, of references to quality. While quality improvements are very much on the agenda for change for Primary Care (Dargie et al., 2000; NHS Scotland, 2010; Holder, 2013; Rosen and Parker, 2013), this is not necessarily reflected in people's perceptions. This is not to say our respondents associated Primary Care with poor quality, only that the associations were not strong enough for the respondents to give these associations particular mention. This might indicate that the NHS has a long way to go to make Primary Care a "quality service". Moreover, the findings of this research indicated that if psychology is to have a greater role in public health, this needs to be done in collaboration with General Practitioners(GPs), not in parallel. The future of psychology in Primary Care was, in our participants' accounts, inextricably bound to GPs. This research concluded that Primary Care is an important specialism for Clinical and Counselling Psychologists to maintain, and may become more vital in the future of public mental health if psychology wishes to have a strong voice.

Although the idea and design of the associated research was mine, the resulting report was created through the collaborative working and learning within the team. This furtherance and development of knowledge and skills gained through the project were in turn utilised in various projects, e.g. the accreditation of psychological services project. Similarly, the Defining Primary Care Psychology in the Present and for the Future was

very well received by the Lead National Assessors group as, in this case, influencing through the evidence seemed more important than utilising emotional persuasion.

Similarly, for The Appointment of Consultant Psychologists: Guidance on using National Assessors for the quality assurance of appointments and clinical governance of psychological practice (revised, Kanellakis et al 2016), a collaborative approach was taken, capitalising on strengths and capabilities, including for collaboration, relational reflection, planning and action that strengthens the link between practice and research. The article “Reflecting on involvement in updating the internal and external guidelines for National Assessors” (Mann and Kanellakis, 2016) provides more information about the collaborative approach taken as well as more details about the research method used in the revision of the Guidance.

In relation to the cluster of Public Works linked to my work as Lead National Assessor, I will reflect again on the alternative attribution that was relevant to The Public Perception of the Professional Titles used within Psychological Services project. The key alternative attribution that seems relevant to me, or even me taking credit for the work of my collaborators. My Public Works highlight the value added regarding the development for leadership potential by working with the same collaborators on sequential projects. Opportunities then arise bringing with them a negotiated position towards first author reflecting the development change in relation to size of contribution.

6.4 Training and Conferences

I have mentioned in earlier sections that I have delivered training such as the keynote speech linked to the Up Skilling project (Bridging Academia and Practice through Action Research; Kanellakis, 2015). Therefore, in this section I will focus on other Public Works. As detailed in my personal biography and mentioned in other parts of this thesis, I have closely collaborated with the Association of Psychological Therapies (APT) and I have been working through them as a Senior Trainer. A lot of this work is not in the public domain on commercial grounds. Nevertheless, the training that I have provided in

collaboration with them at conferences is in the public domain. Thus, I focus on the latter with particular emphasis on my keynote speech on the Register of Patient Accredited Therapists (the RPAT; Kanellakis, 2014). I will also reflect on a workshop that I planned and facilitated on “Maximizing Your Opportunities to Publish in Peer Reviewed Journals” (Kanellakis, 2015). I delivered those at International Congresses on Clinical and Counselling Psychology.

The RPAT was the fruit of my collaboration with the APT, for whom I was appointed as Senior Advisor for the project, to provide expert leadership on the basis of my previous work as Regional Lead for the South-East Coast and the West Midlands for the National Audit of Psychological Therapies (NAPT).

This is a register of psychological therapists who subscribe to the idea that patients’ opinions on the treatment they receive form a key measure for judging a therapist’s work, in addition to the minimum training and regulatory professional standards. I do not see this as a reduction of standards; on the contrary, I see it as enhancing the researcher-practitioner framework alongside the reflective-practitioner one, targeting competencies and examining assumptions that might not be evidence-based. Independent data collection from patients not only provides key stimulus for reflection (and planning for treatment adjustment, as well as for continuous professional development), but also strengthens the connection between research and practice and, thus, the researcher-practitioner application.

Independent feedback from patients is very important to ensure that practitioners do not ignore communications from patients that they may be unhappy with their treatment. This is particularly so when psychological practitioners come to a realisation that a specific patient might need and benefit from a deviation of standardised protocols (which were developed for the key randomised controlled trials that evidence effectiveness of psychological interventions). This information is key to reflective-practitioners to ensure that their patients receive the best service that they can get but also, to reduce the risk of

litigation and complaints to their professional regulator. I agree with Davies that “to be accredited to competently perform a specific therapy is good, but to be accredited by the patients you see is a good deal better” (the RPAT, http://www.therpat.com/therapist-register.php, no date). Davies seems to be in agreement with Lambert (1989) that although evaluating treatment protocols in randomised controlled trials is of benefit, finding the most effective clinicians and examining what they are doing is extremely important. As stated above in the development of leadership potential through collaborative research projects, identifying strengths and building on them can be a more direct and energising approach.

Therefore, the RPAT is a register of people providing psychological therapies who are well-rated by their clients. Feedback from patients is sought at a ‘higher order’ rather than making assumptions about which elements that patients value. It incorporates therapist variables, as well as interactions between therapist and therapy. Moreover, it incorporates dimensions associated to the therapeutic relationship, which is closely linked to collaborative working.

An example of such higher order questions is the “How likely would you be to recommend your therapist to a loved one?” (the RPAT, http://www.therpat.com/therapist-register.php, no date). Recommending to a loved one is an important higher order construct which incorporates a range of lower-order constructs (e.g. punctuality of therapist, theoretical orientation of therapy, interpersonal skills of therapist and effectiveness of the therapist in reducing their symptoms) along with the weightings attached to those constructs by the respondent. It is therefore a very powerful rating to obtain.

I conceptualise the RPAT as part of a dissemination network, which makes more accessible evidence-based research, whilst also addressing dimensions of individuals, as well as expanding the evidence-base through the careful collection of extra data. Moreover, I saw the need for the RPAT to be publicised as a collaborative initiative in the context of further dissemination on another level; therefore, building on my collaborations

with the International Congress on Clinical and Counselling Psychology and the APT, I used the RPAT as the focus of my keynote speech. In appreciation of ongoing loops of feedback, I sought the delegates collaborative reflections on this project. I was pleased that many delegates felt able to share their thoughts and feelings. It became apparent that they found the issue very challenging, provoking fear about what might happen if they support something that in the future grows and acts against its good intentions. Peoples' insecurities and fears that they might not be good enough were also shared. I was able to pick up people's immobilisations linked to potential confusion between excellence and perfectionism.

This training has complimented my work as a supervisor. I conceptualise training as a continuum with supervision. On this continuum, on one end, we have keynote lectures. During which, I make brief interludes, in which I ask delegates to jot things down about questions that I ask them to reflect upon now and again. Occasionally, I even encourage them to speak to the person next to them for five minutes so that they connect theory, research and practice. On the other end, we have smaller group tutorials or even tuition on a one to one basis when I fill in knowledge gaps that individuals have; I tend to do this utilising questions and guided discovery, as well as providing of some key information and supporting participants to build on their strengths. Through my experiences as a trainer (as well as a supervisor), I came to a deep appreciation of the importance of active learning, in which learners actively participate in the learning process as collaborators of the trainer and supervisor. Therefore, both training and supervision have strong interactive elements, which include guided discovery and reflection. Moreover, in the fields of clinical and counselling psychology, the applied elements of skill practice are equally important, so that theory and research serve effective practice, by which they are also informed (fuelling ongoing forward spirals based on collaboration).

The APT has very stringent criteria of selecting trainers as its benchmark is to have a faculty of Clinical and Counselling Psychologists who can provide a resource of clinical

and academic excellence to their training provision. My selection as a trainer involved a rigorous ten-point reference check, which is part of the APT's standard selection procedures. However, even more importantly, I, like my fellow trainers, have to maintain an unusually high average rating from trainees.

At the end of each course I have provided the APT with my comments with a particular focus on ensuring that the training material (e.g. slides and student workbooks) is up to date. The APT recognises its trainers as experts and explicitly encourages trainees to ask the trainers anything that they like with confidence. Moreover, trainers choose which areas of the course to expand on in recognition of the participants working environment particulars. Furthermore, the guided discovery approach to training requires the trainer's creativity, instinct and sensitivity to collaboration, as this gets manifested in each moment. In addition to this, skills practice exercises require for me, as a trainer, to identify how to adjust such exercises and equally important, what to reinforce in the subsequent collaborative reflection with the trainees. What I very much value is the APT's commitment to positive reinforcement and training application of appreciative inquiry in trainees. Moreover, I very much appreciate the collaborative and synergetic creativity between the APT, trainers and students. Student feedback also very much informs updates and developments of courses, especially as several of the attendees already have post-doctoral level knowledge, experience and qualifications.

On reflection, when I think what might have been the key ingredients of the success of the RPAT keynote speech, I conclude that it is collaboration and collaborative reflection. I have reflected on alternative attributions that could explain what worked well in this project. The alternative that I identified was that collaboration did not add value or even reduce what could have been created in isolation and that reflection is a distraction from action. However, these lack both face validity and is not supported by the literature on collaboration (American Psychological Association, 2010; Gokhale, 1995).

I have also considered the alternative attribution that in my role as Senior Advisor to the Register, I hardly did anything and what was created was, in essence, the product of others' involvement. However, the project was a collaboration and on the basis of which I delivered the keynote speech. Not only did the slides include some of my work, but also I delivered the presentation without having a scripted speech. Additionally, it was my idea to present at this conference with the objective of enhancing collaboration and relationally reflecting with colleagues to "collaboratively take stock" before moving forward.

Regarding the workshop "Maximizing Your Opportunities to Publish in Peer Reviewed Journals" (Kanellakis, 2015), a few weeks after its completion, I invited further feedback from participants regarding what they have appreciated and subsequently applied. Therefore, we engaged in a further spiral of relational reflection.

The workshop used the action research framework to collaboratively reflect on what each participant had been finding useful and, through such sharing, reinforce the positives and develop action plans for the future. There were several topics that energised us as a group. Firstly, we focused on utilising resources such as software to manage references, backing up data and naming protocols to enable easy retrieval. Developing collaborations such as through peer reviewing work of others to enhance academic writing skills and sharpening the structure of articles was another key area. We also focused on developing dissemination strategies. Such strategies integrate the scope and submission formatting style of the journals. There was also a lot of energy regarding how we do not fall into the trap of perfectionism and tackling procrastination utilising goal setting and prioritisation systems.

On reflection, when I think what might have been the key ingredients of the success of this workshop, I conclude that there are two closely linked elements: collaboration and the action learning cycle of reflection and planning. I have reflected on alternative attributions that could explain what worked well in this project. The alternative that I identified was that collaboration did not add value or even reduce what could have been created in isolation

and that reflection and planning are distraction from action. However, these lack both face validity and is not supported by the literature on collaboration and the benefits of targeting action to meet objectives and priorities. Actually, some of the very topics of what energised the group was that of collaboration and the development of prioritisation based on a strategy and goals. Therefore, reflection, which requires time, is a foundation on which clarity of the strategy and goals can develop.

I have also considered the alternative attribution that in such an adult learning setting, I hardly did anything and what was created was only the product of the participants' work. However, it was my idea to create the workshop, which I proposed to the conference organisers; unless I had proposed and facilitated it, it would not have happened. I had considered a range of methods of advancing the knowledge on the topic and I concluded that a lecture would be, overall, less engaging and create a climate of passivity rather than action. Based on my previous experiences, I wanted to test out whether appreciative inquiry of the knowledge and skills individuals had could be positively reinforced in small groups and plenary sessions, through sharing with others who can act as further positive reinforces of what they find helpful. Therefore, I also used spirals of planning, action and reflection through which I tested out and applied collaborative reflection. In conclusion, this approach worked well for me, in that I felt supported and positively reinforced by the participants for my leadership and management of group processes, which motivates me for further action.

An alternative attribution could be that the participants were teaching me. However, I was able to bring a lot of experience as a trainer of adults and specialist experiences as the Associate Editor of Europe's Journal of Psychology and Editor in Chief of the EJCoP, as well as peer reviewer for a number of other journals. I am also mindful that the principle of collaboration is based on learning from all collaborators. In any case, challenging the alternative attribution is based on whether I contributed rather than their contributions. Their contributions could be conceptualised as evidence of the success of the workshop in

that I achieved my objective of energising them through positive reinforcement and supporting knowledge dissemination.

Finally, the very fact that the conference programmes identified me as the workshop leader is further evidence of my contribution for planning and running the workshop.

6.5 Collaboration that Links Research, Practice and Reflection

This section is closely linked to the section on researcher-practitioner including the reflective-practitioner framework presented under the EJCoP section. My biographical statement highlights how national collaborations provided the foundation to advancing my collaboration at international level. An example is a workshop that I co-facilitated in my role as Regional Lead for the National Audit of Psychological Therapies under the Auspices of the Royal College of Psychiatrists. In that workshop, service representatives of psychological services across the West Midlands reflected on the findings of the first round of the audit and started planning changes in their practice.

In this section, I, therefore, focus on the globalisation project associated Public Works. This was done with the support of the American Psychological Association (APA), which awarded me in 2012 the International Scholar Award to expand my works on standards of Counselling Psychology, in collaboration with other Counselling Psychologists around the world. This involved reflecting on our working collaborations with people who had very different perspectives linked to their contexts of living and working (including with each other, even though we all shared the passion for advancing counselling psychology and the services the discipline can offer to clients). At a practical level, collaborative working across different time zones was an example of some differences that formed the contextual factors, which influenced the broader different perspectives, for example what standards for clinical and counselling psychology were appropriate in each country.

Through this project, I became more aware of issues linked to globalisation and its impact on dissemination of collaborations that link theory, research and reflection. Although, over

decades, my work has been closely related to issues of globalisation, at this stage I linked practice with theory and research through reviewing the related literature. I found useful the writings of Ezema (2010), who highlights that globalisation is a multi-dimensional and multi-faceted phenomenon and of Pais (2006), who also stresses its several dimensions: political, technological, human, environmental and cultural. It indicates that the world today is more interconnected than before (Pais, 2006). And with this come increased volumes of trade, changes in information technology and communications, increased cultural interactions and a significant movement of people. I recognise all of those in the field of clinical and counselling psychology in general and the dissemination of evidence-based knowledge in specific. I have already stated elsewhere in this thesis about the multi-national and multi-cultural dimensions of the EJCoP and I will provide more details about my work in collaboration with international conferences in the field of clinical and counselling psychology.

In 2012, I attended the APA Annual Convention with the additional financial support and mentorship of the leadership of the Division of Counselling Psychology of the BPS, who were appreciative of my collaborative leadership potential. The Division of Counselling Psychology knew of my work in relation to the EACP and the EJCoP and I have collaborated with several members of the Divisional Committee in connection to these projects. At this Convention, the Globalisation Special Task Group (GSTG) headed a symposium and roundtable discussion to address the issues of adapting to a networked society and how this can be achieved between diverse groups around the world. The objective of the task group has been to support the development of international understanding, collaboration, and relationships among Counselling Psychologists, Psychologists, and Counsellors (both professionals and students) around the globe. The task group adopted a special focus on the impact of globalization on education, research, practice & advocacy, as related to counselling psychology around the world. The GSTG was an initiative set up by the past President of The Counseling Psychology Division of the American Psychological Association, examining the impact of globalisation on

psychology through the creation of world-wide cooperation networks. About 68 professionals from 22 countries volunteered to participate in the task group. Participants were divided into twelve workgroups, consisting of 4-8 participants each; each group, in turn, had representatives from several different countries. Counselling Psychologists can work with individuals across the life journey, their families, small or large groups and systemically, at larger scales, on national, continental and international levels.

The sub-group I was part of was coordinated by Wang (University of Missouri), and had representatives from the US, Italy, Lebanon, Malaysia and the UK. We initially decided to be involved in two symposia at the 2012 APA Convention: the first one, on Training, Accreditation, and Licensure in Psychology – A Comparison Among Five Countries; the second one, a roundtable in the context of the Special Task Group Report from 23 Countries on Globalization Counselling Psychology. The presentation that I shared was entitled “Counselling Psychologists Regulation and Training in the UK in the Context of Europe”.

In the early phases of our work, the group that I was part of became aware of the different forces and contexts (including, for instance, some representation in which counselling psychology does not exist either as a discipline or as a profession, while in other countries it is highly regulated). The group comprised individual personalities, each one carrying its own personal, institutional or national agenda and history. Examples included expecting that specific problems that one’s country was facing were going to be addressed through the group in a pre-conceived way, without sufficient consideration for potential negative impact on other countries. This made us realise that we had to abandon our attachment to specific ideas regarding how the project would work, in order to allow for all participants to engage in a genuinely collaborative and creative project. The GSTG was an excellent laboratory in which to try move beyond the particularities of each country and truly think globally. To this end, the GSTG makes a number of recommendations to be adopted by the community in areas of research, understanding and collaboration.

The above highlight the importance of acting together as well as separately. Genuine collaboration adds synergetic effects that would not be possible otherwise. At the Convention, the theme of diversity as a strength was reaffirmed. The issue of agreeing guidelines is, therefore, a complex one. We need to ensure that any such guidelines value diversity as well as homogeneity and consistency. For meaningful outcomes, significantly more work needs to take place in the form of collaborations and exchanges.

The concept of “reflection as action” might be a useful one in this situation, as it would resonate with the reflective-practitioner paradigm of counselling psychology. This is especially important, taking into consideration the danger of changing one “set of how” for another “set of how” when, what is in fact called for, is a deeper-level transformational change.

The dangers of us not doing so are that counselling psychology stagnates and loses its resonance, its vibrancy and its currency. Moreover, we are losing the potential of tapping upon unused resources. Linked to resonance is the issue of potency (the ability to make a difference in people’s lives). The principle of valuing diversity has a significant presence in counselling psychology; on the other hand, a key challenge is how we embody such a principle and how we carry it into action in a consistent way.

Greater number of collaborative and international projects should be encouraged by the BPS, including secondments and joint conferences. This could foster greater understanding between cultures and contribute to genuine global co-operation. With this, counselling psychology can meet challenges of globalised society and remain effective in practice. I believe it is important to maintain an on-going and multilevel dialogue (discussions between groups and across groups). Such a dialogue could be supported by international visits and secondments.

Research could help determine the best ways forward and the BPS should encourage this by incorporating globalisation into the acceptable themes for conferences, papers and

grants. I came to the realisation that counselling psychology needs to be making the evidence that informs practice and is not just passive. Existing evidence must be put into work. These experiences have deepened my appreciation of how ICT has revolutionised the dissemination of information within clinical practice, but many people are struggling to engage with these new technologies. It is hard to avoid the need for core IT skills, which is becoming key in how psychologists work. Moreover, we need to understand these implications and ensure that training, continuing professional development and codes of practice support psychologists and clients in meeting emerging issues, for example online security and communication etiquette. A telepsychology special interest group could lead these efforts and could also facilitate the articulation of values in different professional settings, informing regulation practices. Therefore, we need to be progressive and responsive rather than avoidant and defensive.

This work was presented at the 2012 APA conference through a cluster of presentations and a round-table session, as well as related publications in our respective countries/regions. Nevertheless, I felt inspired to take further my involvement with dissemination of new knowledge in the fields of clinical and counselling psychology and related standards at International Congresses in these fields. Following the “You have already decided to be a leader” workshop (Kanellakis and Nau-Debor, 2012), under the auspices of the Division of Counselling Psychology of the BPS, I was invited to co-Chair the Second International Congress on Clinical and Counselling Psychology alongside another prominent Clinical Psychologist demonstrating collaborations at the highest level. As part of that collaboration, I also presented a keynote speech at the Fourth International Conference of Education and Educational Psychology. In that conference, I presented part of the systematic literature review on evidence-based psychological interventions for suicide prevention in children (We Can’t Educate a Kid Once Dead; Kanellakis, 2013). This was a dissemination project that I led in my role as Associate Director for Innovation and Research at KCA and in collaboration with others including the leader of the original project undertaken in a single region of the UK. The primary consideration of that project

was the establishment of a strong evidence-base for development and practice based on research evidence and experience of suicide prevention staff in collaboration with young people on adopting a strengths-based approach (Gaffney et al., 2007). In this presentation, besides disseminating the key ideas, I used this keynote speech to also emotionally engage fellow researchers and practitioners, so that they also contribute to this body of evidence-based practice through a range of collaborations.

The theme of collaborations that link research, practice and reflection is, therefore, closely linked with the collaborations presented in the training and conferences section. This is why the researcher-practitioner and collaborations that link research, practice and reflection are proximal in the broader system of dissemination diagram because one fits into the other. This link is also the key challenge to an alternative attribution regarding links between research, practice and reflection not being necessary. However, I have already explored, in earlier sections of this thesis, the principle that without evidence-based innovation and developments that strengthen the link between research and practice disciplines can easily become outdated and perish.

6.6 Appreciative Inquiry

Although appreciative inquiry was a significant theme within the EJCoP section, I wish to briefly refer to my 2010 paper “Counselling Psychology and Disability”. This paper was published after blind peer review at Europe’s Journal of Psychology. Its significance is related to being a form of reflection and synthesis building on advancing my earlier work on the topic including the 2009 collaborative research.

The importance of this work is related to its links with appreciative inquiry but also because I incorporate lived experience. I have referred to those in the earlier sections of this thesis, whilst these also inform the next section where I will revisit my experiences of doing this thesis to not only reflect and plan, but also positively reinforce strengths as a motivator for further action. When I am reflecting on the overall experience of doing my

thesis what stands out is the theme of difference as something to not just be tolerated but appreciated.

7. Overall Synthesis and Conclusion

7.1 Conclusion

In this section, I reflect on integrating the Public Works, the contributions of Public Works to knowledge, the impact of undertaking the doctorate in this way has had on my practice and my future direction. I link these with appreciative inquiry and address how this relates to excellence and perfectionism in the evaluation of my work. I also reflect on “being-with”, the researcher-practitioner and the reflective-practitioner frameworks and other dimensions of ethics.

As introduced in the Methods section, this thesis requires not only the active participation of the author but also of the reader. The emphasis on the active elements compliments some subtler elements that I conceptualise as “being-with”. Although the thematic analysis of my reflections supported the version of the model of dissemination that I have presented in the Methods section and, subsequently, elaborated on, initially this framework looked like Figure 3.

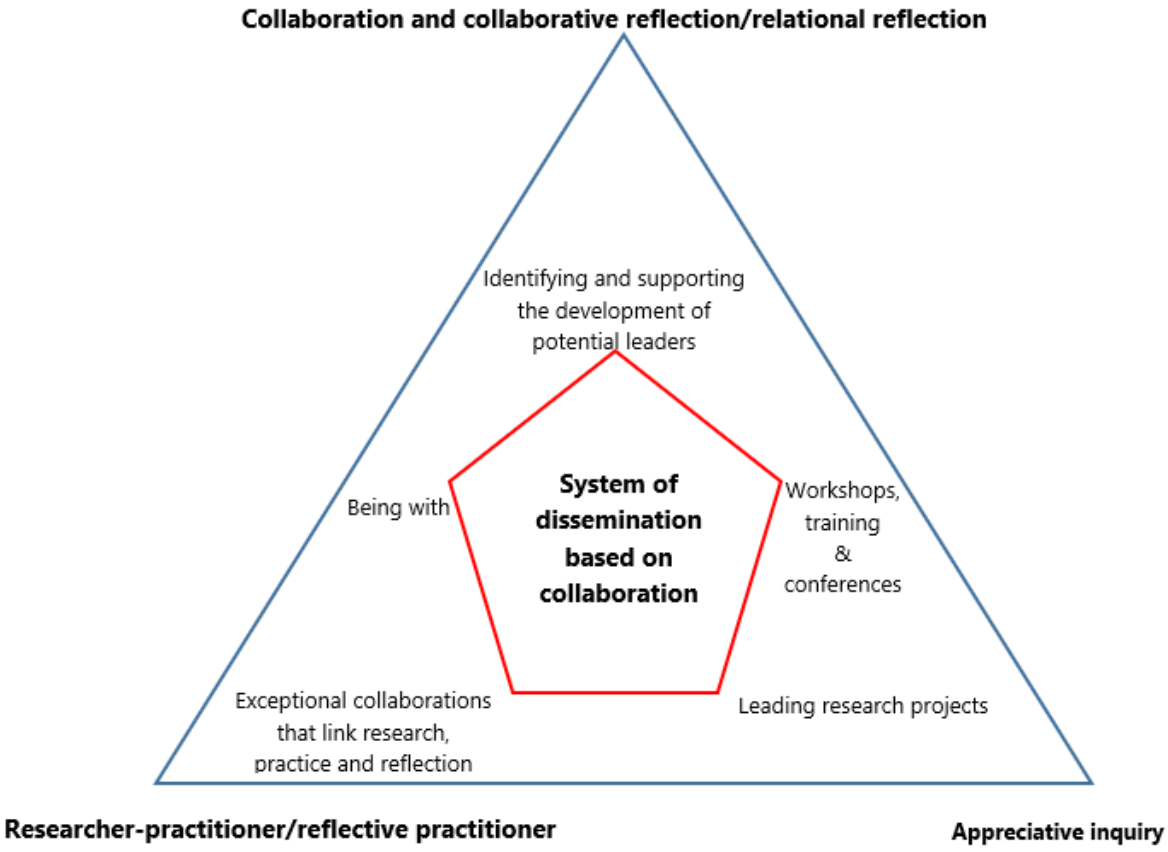

Figure 3. Earlier diagram that crystallised the broader system of dissemination

Being-with provides opportunities of diffusion of knowledge through role modelling and interpersonal change in an experiential (rather than cognitive or intellectual) mode, as described earlier in the thesis about the power of emotions and relationships in bringing about change. Through the process of the large cycle of reflection linked to this context statement, I realise that my experience challenges the underlying assumption that tacit knowledge is best communicated through making it explicit. However, the combination of my research method and the Public Works that I have focused on did not provide sufficient data to unfold the ‘’being-with’’ within this thesis. Thus, that area could be the focus of future research, possibly drawing upon research methods such as 360-degree evaluation models and detailed analysis of verbal and non-verbal communications, as well

as analysis of explicit and implicit interactions over briefer and longer term time-frameworks.

Future research could include interviewing people like Shafran, Clark and Malikiosi, who are international figures and who share my passion about dissemination of knowledge in the fields of clinical and counselling psychology. Their interviews could be analysed using thematic analysis informed by the model presented in this thesis to either confirm or disprove it in relation to their work. Another piece of research could be to interview people very different from myself, for example people with a passion on dissemination but who do not work in the fields of clinical and counselling psychology and explore the fit of the model. Similarly, it could be interesting to interview people in the fields of clinical and counselling psychology but outside of Europe to explore how greater cultural differences have an impact.

Further research could also apply the emerging knowledge about how autoethnography could be used in the fields of clinical and counselling psychology (please see related information in the EJCoP section).

7.2 Reflection - Reflect on the Learning which has Emerged.

Through the process of the DProf studies, I deepened my understanding regarding the difference between excellence and perfectionism. This difference underpins not only appreciative inquiry but possibly through its dynamic interconnections with the rest of the themes too. Similarly, it is something that I have been grappling with, not only when I was originally engaging in the Public Works, but also at the stage of reflection in connection to this thesis. An example in relation to the West Midlands, a key decision was who was going to do the systematic literature reviews. I appreciate that if we had delegated this task to someone who had already conducted several Cochrane systematic reviews, the piece of work might have possibly been of higher quality. However, we had to make a decision within the available parameters (including the time and money available) once those were tested regarding flexibility. In the end, it was not the best option that one might

have selected without taking into account the specifics of the realities of the current situation but was the best that we had. I reached that after careful reflection on the information that I had collected regarding the current situation, as well as knowledge from related situations. Moreover, I tried to encourage rigour that supports excellence rather than perfectionism. For example, I signposted the research assistants to the Cochrane step by step method and associate tutorials that highlight their standards. However, I suggested that we categorise the Cochrane requirements into three categories: 1. Bare minimum; 2. Excellence/high standard and 3. Impossible for us to do within the time scales available and, therefore, perfectionistic in our context (e.g. some of the steps would have required more than a year and a half process, which was well beyond any extended completion-deadline of the project). I advocated that we go for category one and two, whilst recognising that three was unachievable. Having stated that, I repeatedly checked and advocated that we double check the underlying assumptions, for example, why couldn't the project run for longer. However, I did that in the spirit of collaboration rather than being obstinate. I see epistemological connections with abduction, which is one of the foundations of action research (Barton, Stephens and Haslett, 2009). McKaughan (2008) highlights the importance that Peirce (1877, 1955) has given on how much is to be allowed to each investigation, having a certain fund of energy, time, money, etc. Similarly, someone cannot keep expanding the detail as part of refinement. Part of excellence is to be able to let go of some elements and it is this letting go that comes to a conclusion.

This distinction between excellence and perfectionism has been critical in establishing the EJCoP. A key focus of my reflections has been what is an appropriate point to disseminate research articles. Initially authors were heavily supported to reach the minimum standards, but these have been gradually increasing as the Journal has received sufficient submissions to enable a high rejection rate. I have been mindful that any piece of work can keep on improving, but perfectionistic blocks in disseminating an article can lead to insular practices that undermine dissemination of the progress so far and the associated knowledge. Not disseminating due to perfectionism causes ethical

concerns as much as disseminating below the standard. Positive reinforcement and appreciating of strengths in terms of excellence rather than perfectionism involves celebrating at every milestone.

Through discussions with my academic advisor collaboratively reflecting on my thesis, I became familiar with the methodological framework of bricolage (Kincheloe, 2005). It favours focusing on webs of relationships. Although my primary objectives are not the "uncovering of the invisible artifacts of power and culture and documenting their influence … on [my] own scholarship and scholarship in general" (p. 324), there are a lot of similarities between my approach and that of bricolage. Though I have not adopted the research processes of philosophical analysis, historiography, ethnography, psychoanalysis, discourse analysis, textual analysis, literary analysis, semiotics, hermeneutics, aesthetic criticism, theatrical or dramatic ways of observing and making meaning, I can identify as a bricoleur.

I understand that bricolage provides alternative forms of research rigour (Kincheloe, 2005). As Innes and Booher (1999) describe, I have "a heterogeneous and finite store of materials and tools that were collected over time" (p. 15). My materials are my Public Works and my tools are my research methods. Innes and Booher cite Levi-Strauss (1966) and contrast bricolage

> "to the rational, instrumental model of seeking means to reach a given end because on the one hand, the ends are not clearly known at the outset, and on the other, the 'reasoning' process does not use logical deduction, but is more of a creative design process" (p. 15).

As highlighted in the research method and methodological frameworks section, this thesis is based on specific ontological and epistemological foundations. These are similar to the ones adopted by bricolage. I often use with my clients the metaphor of different people watching the world flow by like a river where the exact contents of the water are never the

same (Kincheloe, 2005). This is applicable to both psychological practice and to psychological research.

I find the words of Kincheloe as a great summary of how my thesis needs to be approached:

> "Because all physical, social, cultural, psychological, and educational dynamics are connected in a larger fabric, researchers will produce different descriptions of an object of inquiry depending on what part of the fabric they have focused- what part of the river they have seen" (p. 333).

7.2.1 Further Synthesis and Rigour

On reflection, on the work of Marton, Runesson and Tsui (2004), I see the links with the researcher-practitioner model (in a way that includes the reflective practitioner model). This supports the notion of ongoing creation of knowledge, so that it meets the requirements of the situations that the practitioner is encountering at any present moment. I am mindful that the objectives of dissemination of knowledge in the fields of clinical and counselling psychology are closely related to developing practitioners so that we have the knowledge and skills that we, as individuals, require at any present moment. The work of Marton et al. also highlights the importance of action research in advancing applied knowledge or episteme. They draw caution on assuming that educational research should and could address general questions such as whether doing x is better than y, even if we were to assume that we were to have consensus that "better" refers to "better for learning". I find this very humbling.

Following a single case study, autobiographical methodological framework, the criterion of a professional doctorate to produce some change can be translated as me changing through the process of undertaking it. Conducting a broader spiral of reflection has developed my clarity about my values, conceptual framework and the interconnections between different components. Moreover, it is also providing a platform for positive

reinforcement of my work. I am also mindful that up to the point of passing the DProf assessment, the reinforcement is pending and subject to the decision of the assessors. Therefore, the real impact of this Doctorate can be seen only when I complete this piece of work, which does not finish until the point of successful graduation.

Seligman is a Clinical Psychologist who has founded positive psychology and the identification of strengths within individuals (Peterson and Seligman, 2004). I have used his questionnaire process (VIA Institute of Character, 2016) as a method of synthesising my reflections with a forward focus as this is consistent with both appreciative inquiry and action research. I have triangulated my self-assessment with the ratings by two experienced psychologists who have known me for almost two decades. Through this process, three strengths that are not related to the above themes were identified. These are 1. Honesty, 2. Zest and 3. Judgement. I have decided to exclude strengths from the Seligman classification that seemed too proximal to the themes described in this thesis, as part of challenging underlying assumptions. Examples of the themes excluded are creativity, leadership and love. Creativity is related to leading research projects and working with others collaboratively to produce links between research and practice that reach as many Clinical and Counselling Psychologists as possible. Therefore, it is too close to collaboration, linking research practice and reflection, leadership of research projects, the researcher-practitioner framework and the system of dissemination. Leadership is related to leading research projects and identifying and supporting the development of potential leaders. Love (which is defined in the questionnaire as “Valuing close relations with others, in particular those in which sharing and caring are reciprocated; being close to people” [no pagination]) is closely related to how I experience collaboration.

The questionnaire defines honesty as “Speaking the truth but more broadly presenting oneself in a genuine way and acting in a sincere way; being without pretense; taking

responsibility for one's feelings and actions" (no pagination). Although this quality, especially in relation to genuineness, could be understood as one that underpins collaborations, in essence I dispute the importance of speaking the truth on the grounds that I believe that multiple truths can co-exist. Whilst I also acknowledge that this quality could be related to the researcher-practitioner dimensions, my emphasis on subjectivity goes beyond a singular perspective on truth. Moreover, in relation to taking responsibility for one's own feelings and actions, if I were to generalise, I see those dimensions as interpersonal rather than individual (I believe that most of our emotions and actions beyond those about physical survival are interpersonal).

The questionnaire defines zest as "Approaching life with excitement and energy; not doing things halfway or halfheartedly; living life as an adventure; feeling alive and activated." (no pagination). Although energy and excitement are characteristics that often others attribute to me, I dispute the importance of ignoring the benefits of taking appropriate action even if this is half way to a perfect scenario, as I have already documented in this thesis that perfectionism can undermine creativity. Although feeling alive and activated could be seen as a quality of leadership, I have worked with a lot of people who have significantly lower zest than me and have been highly effective, especially in the fields of clinical and counselling psychology in which relationships are of essence.

The questionnaire" defines judgement as "Thinking things through and examining them from all sides; not jumping to conclusions; being able to change one's mind in light of evidence; weighing all evidence fairly" (no pagination). However, although being able to change one's mind in light of evidence could be linked to the researcher-practitioner framework, I have already stated that I value multiple perspectives, which also accommodate contradictions and complexity (Clarkson, 2003). Similarly, in relation to examining things from all sides, I have learnt to be cautious about perfectionism and I value plurality without spreading myself too thinly in an effort to cover all sides.

I am mindful that commercial sensitivities interact with the collaborative dimensions of my work. These have been requiring careful navigation to maximise what can be shared, in general and in this thesis, in specific. Openly sharing information without high regard to confidentiality could damage my working relationships with the collaborators of the projects that I have been leading. From my perspective, although we have used a number of confidentiality written agreements, unwritten and implicitly agreed confidentiality understandings are also of great importance. This is not only regarding legal obligations, but also in relation to creating a psychological safe foundation of “being-with” my collaborators. As collaboration is a key foundation of these works, damaging this would undermine dissemination, even though, on a superficial level, minimising restrictions on confidentiality would seem to support dissemination. I appreciate the ethical tensions linked to the associated decisions, which go beyond the legal obligations of explicit and implicit confidentiality arrangements. Thus, as anonymisation might be of limited use in the context of these works, the appreciative inquiry framework has provided some extra leverage in increasing what can be shared and reflected upon. In the public domain, besides commercially sensitive restrictions on financial grounds, a lot of my collaborators have expressed appreciation of the recognition of strengths (provided intellectual property rights are not compromised).

Looking into the future, I am advancing my dissemination strategy in promoting the researcher-practitioner framework in clinical and counselling psychology through collaboration with the HCPC. In specific, I have recently been appointed by the HCPC as a representative for Clinical and Counselling Psychologists to ensure that the doctoral courses in clinical and counselling psychology, approved by the HCPC, meet the required standards. The approach adopted is that of building on strengths and, also, collaboration. The collaboration extends beyond my collaboration with the officers of the HCPC, the directors of the doctorate courses, their faculty, students and their patients, to also include collaboration with the professional body, which is the BPS. I very much appreciate the commitment of the latter to collaboratively advance standards with the motto of

Accreditation through Partnership. My appointment to this role is both a humbling honour and a great opportunity to advance, through this senior leadership position, collaborative working, bringing together research and practice and enhancing standards whilst valuing diversity. Moreover, I have been selected by the HCPC to be interviewed for A Day in the Life of a Partner feature of the HCPC newsletter, which provides an additional avenue for dissemination of the researcher-practitioner framework in relation to advancing standards and collaboratively building on the strengths.

7.3 Expansion on the Diagram and Further Reflections on Collaboration

Following the viva, the original diagram was developed to include the values (Figure 4. Development of the diagram). Although the values are not absolute strengths (i.e. they are strengths only in relation to the other VIA character strengths), they emerged as significant elements of this idiographic study, as an acknowledgement of the importance of the values as driving forces. Moreover, they are positioned in the outer circle in recognition of less proximity to the other elements and potential tensions with the positivist frame. The diagram also has used circles rather than angular patterns, so that there is increased consistency between the visual representation and the underlying principle of fluidity.

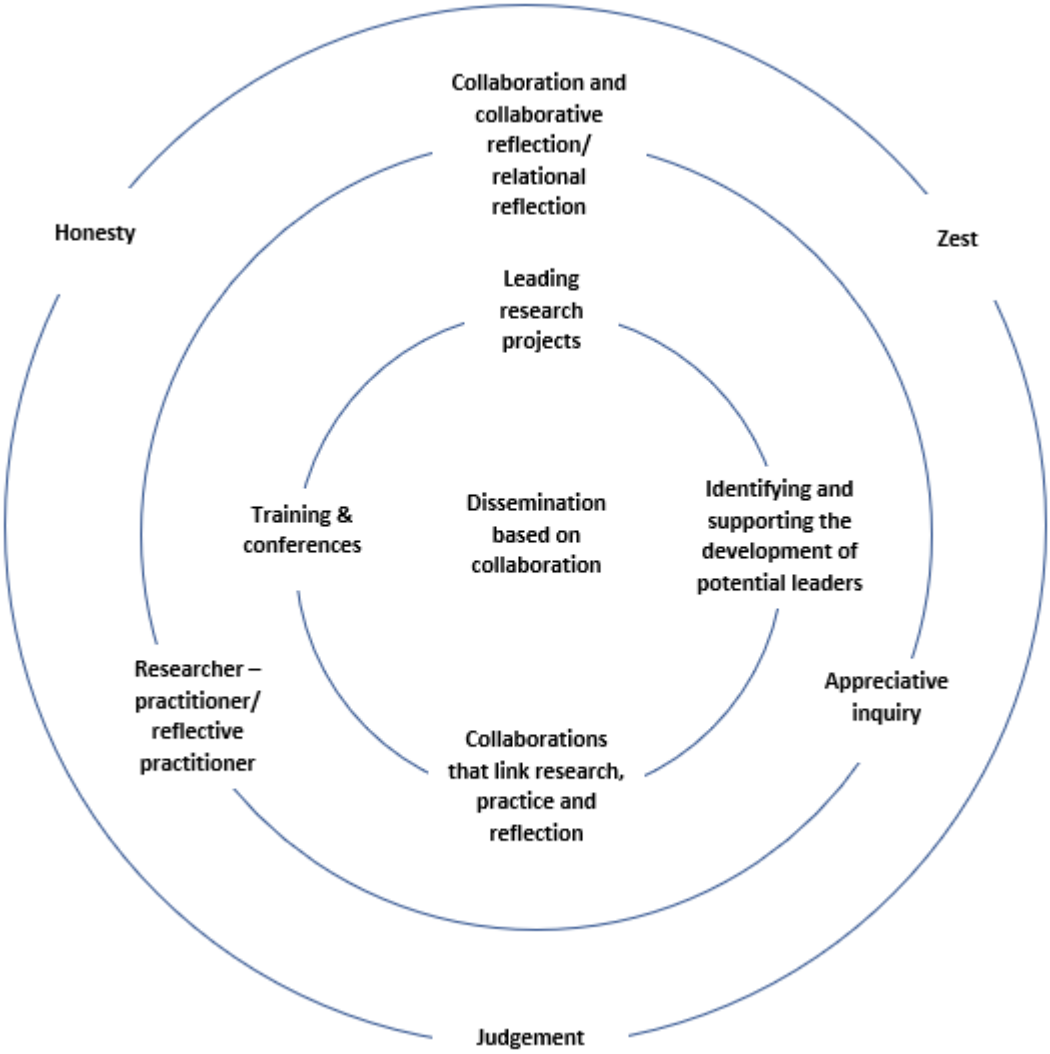

Figure 4. Development of the diagram

In addition to the above expansion of the diagram, I have reflected further on collaboration and what it means to me. I appreciate that this is important as, unless one makes explicit what one means when using such a key term, others are left to superimpose their own frameworks that underpin the use of such terms. This is even more important in research like this, which embraces subjectivity and values that I am both the researcher and the primary research subject. Moreover, I have adopted a combination of appreciative inquiry and action research, building on the diversity within action research methods; therefore, I am developing my own concept of collaboration.

Within an appreciative inquiry framework of reflection, there is little space for the shadow side. Nevertheless (avoiding the all or nothing cognitive traps), there are some elements of the shadow side of collaboration that can be unfolded without losing consistency with the research method adopted in this thesis and, therefore, maintaining within the scope of this work.

In the context of the above, the limitations of collaboration can be acknowledged. In my experience of collaborations, although there are a number of advantages linked to collaboration and sometimes collaboration emerges as essential rather than desirable, there are complexties when collaboration gets introduced into projects. Work can slow down and differences can fuel fear, frustration and blaming. I find useful that Dick (2014) describes collaboration and stakeholder engagement as not an all or nothing categorisation but ordering along continua. Especially when numbers are large and several stakeholders have less influence in making a project succeed or fail, networking or even mere monitoring and informing them about some elements might be sufficient and necessary to make the project operationally manageable. Moreover, different stakeholders/collaborators bring different levels of knowledge and understandings to the endeavour. In my experience, collaboration is not necessarily about an equal contribution or sides but it is more about the fluidity of learning though different interactional experiences - conflict and working towards alternative viewpoints, working though frustration in self and others, negotiating power differentials, recognising what we put into the pot may have unintended consequences.

This seems to fit well with the Power Threat Meaning Framework (Johnstone & Boyle, 2018), which highlights that collaboration taps upon both the positive aspects of power such as creativity and on the shadow side in terms of being hypervigilant/preparing to attack, dominance/seeking control of others, emotional dysregulation, emotional defences, perfectionism, compulsions, ruminations, overworking and exhaustion amongst others. This framework names various dimensions of power. These include power by force or

coercive power, which is defined as aggression, threats to frighten, intimidate or ensure compliance. This framework acknowledges that although coercive power is often negative, it can be used positively and benevolently, especially in the case of hierarchical systems in which power is not equally shared by various members and such differences are integral to organisational arrangements of a system.

Closely linked to power by force is legal power, which can involve the use of rules and sanctions supporting or limiting other aspects of power, offering or restricting choices and can involve coercion. Controlling others' access to valued possessions and services (which can be linked to pursuing valued activities), is also connected to economic and material power. The notion of social/cultural capital is used to refer to dimensions of power related to a mix of valued qualifications, knowledge and connections, which ease people's way through life and can be passed indirectly to others through association. The various dimensions of power seem to have a strong interpersonal dimension, which, according to the Power Threat Meaning Framework, refers to power within intimate and even caring relationships (e.g. the power to look after/not look after or protect someone, to give/withhold affection or even withdraw that can have elements of abandonment; interpersonal power has been linked to undermining or supporting others in the development of their beliefs and identities). Finally, the power of controlling ideas and valuing some perspectives, theoretical (and research) models and ways of making sense over other alternative frameworks is identified as ideological power. Abuse of Ideological power can be understood as central to the experience of invalidation (i.e. the antithesis of the principle of validation, upon which the appreciative inquiry approaches often are based).

Although my preference is to focus on identifying and cultivating the relationships that have the greatest win-win potential, there are situations where others are not supportive of the way I am progressing, and their power (in the framework of stakeholder analysis) makes it unwise for me to ignore that. I appreciate that where there is difference there is a

lot of potential for growth and, therefore, I welcome some differences. On the other hand, I am mindful of how conflict can be corrosive. Thus, I prefer distancing rather than dishonesty, as the latter would cause incongruence with my value of honesty. I appreciate that honesty requires acknowledging differences even when being explicit about these differences threatens the working relationship. I have found useful what I learnt in my couples' psychology training that relationships need to have a lot of common ground and small amounts of difference for them to work effectively. The common ground fits with the win-win principle; unless relationships are grounded on a win-win basis, then I believe that they are not constructive and effective.

In conclusion, the light and shadows of collaboration depend on where one's light is shining. Although the light can shine on different values over time, it is the interaction of the implied values of leadership, creativity and love (as articulated in 7.2.1) and the values of honesty, judgement and zest that emerged in the forefront, with the other elements of this idiographic model that create the conditions for learning and development. The shadow of one is not the shadow of another and this is why the values are an important element of a system of disseminating research knowledge in any field and particularly so in the fields of clinical and counselling psychology.

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Appendices

Appendix 1: Additional Biographical Information

Subsequent to joining Europe's Journal of Psychology as an Associate Editor, I was appointed as a Psychology Expert in the Efficacy & Mechanism Evaluation College of Experts and the Health Technology Assessment Programme at the National Institute for Health Research (NIHR) and Medical Research Council. Within this role, I have provided confidential expert opinion regarding commissioning decisions for future research in clinical and counselling psychology that supports the researcher-practitioner framework. Through this, I strategically cultivated my ability to identify strengths without confusing perfectionism for excellence.

During my employment for South Staffordshire and Shropshire NHS Foundation Trust as a Consultant Psychologist working for the Psychology Directorate and the Modernisation and Workforce Development Unit, I led a research project that analysed the knowledge and skills of the psychological professions in collaboration with national professional bodies and projects like Skills for Health. Moreover, I led a project that researched the mismatch between the research of the students on the Clinical Psychology Doctorates in the region and the practice priorities faced by the employing Trust of the students. This led to the appointment of some joint staff working half time for the Trust and half time for the corresponding University to follow on the strategic recommendations that were also adopted by the Research and Development committees of the relevant institutions in the region. The key findings included that students were not researching topics that were of high priority in relation to the realities of clinical practice, as well as that students were not disseminating their findings and other learning from their research, which was abandoned at the point of gaining their doctorate. Unfortunately, the key reports from this work were classified as commercially sensitive and therefore, it cannot be submitted as part of the evidence for this project. Nevertheless, a lot of this material was utilized by the

subsequent Up Skilling project, which I will describe below, as this material was accessible by the organisations in the region.

Since 2013, I have also been appointed to the World Health Organisation's Research Global Clinical Practice Network. This is a collaboration of researchers and practitioners linked to clinical and counselling psychology, but also other disciplines such as psychiatry, to validate the diagnostic criteria for mental health and behavioural disorders that take into account cultural diversity dimensions. Moreover, this project connects the realities of clinical practice with theoretical frameworks through research that entails collaborative cycles of dissemination of existing formulations, reflections, data collection, reformulations and further action. Again, this has provided an additional opportunity to both collaborate and link research and practice through reflection and feeds within the multifaceted system of dissemination that I have mentioned above and will reflect on further below.

Appendix 2: My Epistemological Foundations and Frameworks

[*This has not been revised, as I would like to see whether it is received differently now that the autobiographical positioning statement has been significantly revised and a method section added at the end of this section].*

I find useful the epistemological framework of Clarkson with whom I trained for two years from 2000. Clarkson was a Clinical and Counselling Psychologist and management consultant who developed a seven epistemological domains tool to enhance the organisation and the clear communication of ideas regarding knowledge (Clarkson, 1975; 1999). Although at times the model made reference to levels of knowledge, I prefer her reference to "domains", in light of Clarkson's clarification that the model does not set hierarchies of value, i.e. no domain is seen as superior to others (Clarkson, 1975, 1999; Kloprogge, Gleeson and Clarkson, 2009). Clarkson (2003) seems to agree with Nobel Prize winner for science Edelman whose work about knowledge being fragmentary and partial she cites. Van de Ven (2007, p. 4) cites Poggi that "a way of seeing is a way of not seeing" regarding knowledge being partial and he stresses that our attempts to understand are "severely limited and can only be approximated" (p. 14). He adds that "no form of inquiry is value free and impartial" (p. 14). Van de Ven highlights the methodological implications of this, including scholars needing to be reflexive and transparent about our interests, perspectives and roles when conducting research.

Clarkson (2003) also highlights the work of Gell-Mann (who is another Nobel Prize winner for science) about multiple realities and links her framework to the complexity science. Clarkson asserts that "reality" cannot fall in a "true-false" dichotomy. A pluralistic to knowledge is also advocated by Van de Ven (2007), who attributes the limited successes in bridging research and practice to ignorance of such pluralism.

I appreciate that Clarkson positions her model not only within epistemology but also ontology (in relation to its concern with existence or being); this is important to me as I

cannot see clinical and counselling psychology being able to exist without reference to what we understand as being human. Moreover, Clarkson identifies an ontogenic and phylogenic unfolding across the domains.

Mental health and distress exist at physiological, sensory and proprioceptive perceptual way in our bodies that are present before language (Domain 1); examples include the sleep arousal and sleep rhythms alongside the range of psychophysiological and sensory awareness that we feel as part of mental health and distress. Clarkson has linked this to how organisations have developed to more complexity and how people feel more stress. At the same time, Clarkson highlights that although physiological processes can be "measured" in some instances (e.g. wave patterns on an EEG), perceptions such as pain are in essence subjective and embodied.

When I reflect on the high profile of mood disorders within the fields of clinical and counselling psychology and government funded efforts to increase mental health, I appreciate how mental health and distress exist at affective or emotional domain too (Domain 2). Even when we think beyond the area of mood disorders and we explore the significance of emotions in borderline personality disorder, the recent references to emotionally unstable personality disorder and psychological models that emphasise emotional regulation and distress tolerance highlight the significance of this domain. Fear and anger are two examples of the subjective experiences that I have noticed their existence in impasses. Kloprogee, Gleeson and Clarkson (2009) assert that every organisation is an emotional place. Clarkson highlights the negative impact of pressures for higher performance in organisational settings. In relation to epistemological dimensions, Clarkson emphasises that emotions are essentially felt, experiential and subjective, whereas our knowledge about them is existential, phenomenological and unique; nevertheless, there are several psychology tools, techniques and approaches that can identify and facilitate the emotional colour of groups of people that are associated to organisations.

A key domain for my work is also the nominative one (Domain 3), which comprises naming through word, resting on divisions into classes and categories. Clarkson identifies this as implying reflective shared experience and forming the foundation of human culture. Clarkson clarifies that such name giving precedes complex abstract thinking. The process of placing objects together on the basis of certain resemblances is understood as an area of objective nominalism. Within any common set of language rules shared by a group of people, agreements can be reached (even if disputes take place) that certain words are known to stand for certain kinds of objects or phenomena. Therefore, definitions have great importance in relation to this domain. Philosophically, Clarkson positions this domain in the realm that phenomenologists such as Merleau Pointy theorised as the third way between idealism and positivism.

Taking into account the organisational dimensions of my work, the normative domain (Domain 4) is of great relevance to me too. This domain comprises the various aspects of the individual encountering the norms and values of groups to which the individual is linked. These groups range from families to professional groups, organisations and cultural groups. This domain deals with collective belief systems, values, norms, societal or organisational expectations, stereotypes, knowledge of attributes and practices regarding people as interpersonal and social beings. Clarkson links this domain to ethicist philosophers, Oppenheimer and Nagasaki and an understanding that science or even anything we say (or not say) is linked to values and explicit or imbedded cultural constructions which privilege certain voices (whether these are oral or expressed through writing). As we cannot focus our enquiry on everything, Clarkson identifies that we (consciously or not) ignore, neglect or refuse the rest of the areas of enquiry. Therefore, “values, morals [and] ethics are … a different realm of questioning and knowing” (p. 6). Clarkson further asserts that the normative tends to support homeostasis and resistance to change (unless change becomes the norm of an organisation), as the norms provide a sense of security linked to the functions of differentiating what or who is included and what or who is excluded from a group.

Domain 5 is the one where causal relationships can be clearly established and Clarkson names this as the logical – rational. Positivism and objectivity are positioned in this domain. Clarkson also asserts that “if there is a disagreement about a “fact” within a particular knowledge community, it is a misnomer and it does not belong within this realm…” (p. 6).

Clarkson also identifies as a characteristic of all of the above 5 domains that “it is possible to establish truth values by consensual practices of that time and culture” (p.6). Ratner (2006) highlights that when humans are encountering pain but also psychological illness, the human expectation and wish is for “a single, objective *truth* that is confirmed by many doctors who all base their evaluations on objective theories and evidence” (p. 7) and refers to “Allgemeingultigkeit” which is translated as universal or general validity and universality. Ratner asserts that “when it comes to important issues, everyone is a critical realist, not a social constructionist …, believ[ing] in a real world that is knowledgeable through evidence and logical reasoning” (p. 7); although he acknowledges that “the researcher always affects the object of the research” he asserts that “this does not preclude gathering objective information” (p. 4). However, Leahy (1999, 2003, 2007, 2015) building on the work of Beck and Burns (Grohol, 2016; Batmaz, Kocbiyik & Yuncu, 2015) highlights the cognitive error in using one’s feelings as the sole “guide to what the real world is like” (Leahy, 2003, p. 110) . On the other hand, Jensen, Resnik and Haddad (2008) highlight that in professions where human interactions and care are central aspects of the work, the clinical reasoning process is not analytical or deductive because the focus of care is a much larger process and clinical reasoning is presented as an iterative and ongoing process that comprises integral components such as knowing a patient, understanding his or her story, fitting the patient’s story with clinical knowledge and collaborating with the patient to problem solve. (p. 127). Loftus and Smith (2008) citing Norman’s review of clinical reasoning literature in medicine agree that there may not be a single representation of clinical reasoning expertise or a single correct way to solve a medical problem. Similarly, Higgs, Fish and Rothwell (2008) object to the application of

what knowledge is from the physical sciences and the empirico-analytical paradigm to health sciences, as they highlight that in that paradigm “knowledge generation is viewed not as a process of creation of knowledge but as a process of discovery of empirical ‘facts’ about the (physical) world/universe”, knowledge in that view “is an account or a theory of what is ‘out there’” and “it represents nature rather than the notion developed here, that theories are developed in the context of human activity” (p. 165). They refer to the work of British philosopher Popper who argued that the discovery of scientific facts does not begin through objective or empirical observation as claimed by positivist epistemologists, but by a process of theoretical conjecture from which testable or falsifiable hypotheses arise. Moreover, they highlight that in any case, the utilisation of a ‘hypothetico-deductive’ approach that is closely linked to the empirico-analytical paradigm, a process of disproof rather than proof is followed; “while seeking *the truth*, such research actually generates knowledge or *a truth* that is currently undisproved by testing through observation or experimentation” (p. 165). Clarkson (2003) highlights the logical fallacy of the *Argumentum ad Ignorantiam* (i.e. argument by ignorance) and asserts that our ignorance to prove a proposition does not establish the truth or falsehood of that proposition, citing the work of Corpi. Higgs, Fish and Rothwell (2008) also refer to the work of Rogoff on ‘participatory appropriation’ to emphasise the relational, mutual and dynamic nature of learning that would be appropriate for health professionals. They conclude that in the health professions knowledge is a sociohistorical and political construction of individuals or groups of human beings and they emphasise that there are different forms of knowledge that are of value for different communities and contexts. Van de Ven (2007) highlights the methodological implications of the understanding that the problems we try to solve through research in this area are bigger

Clarkson (1975; 1999) links theories with metaphors in Domain 6, as this domain tries to find explanations and related stories to make sense of the world and show how things have come about, why things are the way they are and why humans behave in a certain

way. “They do not establish the ‘truth’ but remain some of the possible versions that when verified or negated pass from theory to the factual domain (5)” (p. 7).

Finally, Clarkson positions the epistemological area concerned with the soul in the transpersonal and currently inexplicable domain (Domain 7). Paradox is also positioned in this domain too. In my work, this domain is of great importance, as it includes paradoxes linked not only to non-medicalisation of the soul, but also lived experiences of psychological distress as a way of knowing that words might not be the best means to express. Clarkson highlights that “it is characteristic of experience in this domain that people are convinced by ‘direct experience’ which feels impossible to articulate or effectively communicate to others who have not shared similar direct experience - or who come to do so” (p. 8). Clarkson links this domain with Heraclitus, Heidegger, Tao and Wittgenstein.

As my work involves working not just with individuals but larger organisational systems, the utility of this model in organisational thinking (Kloprogee, Gleeson and Clarkson, 2009) was particularly important to me. I find that the seven domains model fosters communication, and I agree with Clarkson that a lot of disputes are fuelled by mis-categorisation or mis-classification of a piece of knowledge. The Clarkson framework also support the cross-cultural dimensions of my work that involve power differentials. I refer to culture not only in terms of ethnicity and race, but also in terms of sexual orientation and (dis)ablility; Clarkson (2003) highlights the logical errors associated with Solipsism. Clarkson also cites Corpi’s *Argumentum ad Baculum* (i.e. appeal to force) which is committed when acceptance of an argument is reached on the basis of force or threat of force and intimidation, which includes the threat of exclusion from a group or community.

Clarkson’s model is in line with the Van de Ven (2007) pluralistic perspectives that, instead of focusing on convergent central tendencies, inconsistent and contradictory findings are valued and classified towards more holistic or integrative explanations. Although Van de Ven acknowledges coherence as a positive quality, he also very much

appreciates paradoxes, especially when one is researching real world problems that are characterised by complexity. Moreover, he advocates for valuing conflict and that power is not used to squash one perspective over another. He also cites Friedman whose arbitrage strategy involves mapping the entanglements between different and divergent dimensions of a problem, its boundaries and contexts. Although the principle of triangulation is presented as limited, Van de Ven also cites the work of Collins and supports the evolutionary analysis in which, at any specific time, only three to five models seem to compete for consideration in efforts to refine knowledge.

Appendix 3: Additional Contextual Information Regarding Public Works 1

How it was Funded

I appreciate the importance of being transparent about the funding source for the project. It was funded by the Health Education West Midlands which is part of Health Education England. Health Education England is the body that plans the funding of all health professionals and has a strategic but also some commissioning functions. The West Midlands is the only area in the country where there is a specific institute for mental health and that is why the project was focused there. Health Education West Midlands wished to provide a partnership approach to address the following issues: a deficit in understanding the required psychological practice contribution of each part of the specialist clinical mental health workforce; a deficit in understanding the role existing programmes of learning and developments have, in developing a required psychological practice skill sets; enhancing the regional psychological practice learning and development offer, including the offer to non-medical health specialists; developing a cost effective model of mainstreaming psychological practice therapies across the specialist clinical mental health workforce.

National Agenda

The project needs to be contextualised in a national agenda. There is ever increasing evidence and greater advocacy, making stronger the voices of people in their wish for greater psychological input. Secondly, there is a higher drive for cost efficiency, ensuring that the tax payers' money is used wisely, which is a reasonable expectation. Lastly, there is a growing belief that psychological interventions or psychological practice is not just the job of psychologists, but the psychologist's role is focusing on developing innovative clinical and cost effective interventions and sharing these innovations, knowledge and skills with other professionals.

Appendix 4: Further Relational Reflections on Public Works 1

Appreciating the key importance of dissemination for action research (Dick, 2014; NIHR, 2001) the epistemological principle of collaboration including across disciplines (Van De Ven, 2007; Coghlan, 2006), I presented this project at the 2015 Multi-disciplinary conference integrating the 2015 International Conference on Education & Educational Psychology and the 2015 International Congress on Clinical & Counselling Psychology. I specifically asked feedback regarding alternative theoretical models that could be of relevance to this.

Sward (2015) highlighted the Marton theory of variation and the learning studies. On reflection on the work of Marton, Runesson and Tsui (2004), I see the links with the researcher-practitioner model (in a way that includes the reflective-practitioner model), as this supports the notion of ongoing creation of knowledge, so that it meets the requirements of the situations that the practitioner is encountering at any present moment. I am mindful that the objectives of The Up Skilling project are closely related to developing practitioners so that they have the knowledge and skills that they, as individuals, require at any present moment. The work of Marton et al. also highlights the importance of action research in advancing applied knowledge or episteme. They draw caution on assuming that educational research should and could address general questions such as whether doing x is better than y, even if we were to assume that we were to have consensus that “better” refers to “better for learning”. I find this very humbling, remembering that The Up Skilling project is educational research in the fields of clinical and counselling psychology.

At the same conference, also Bekirogullari and Parry referred to reflective teams and Anderson’s principle that reflection helps with resolving impasses and facilitates development. They highlighted that reflection values difference and clarified that agreement is not necessary, let alone more valuable than disagreement. They also highlighted how change is often obstructed by transgenerational patterns and scripts (McGoldrick – Byng Hall). Collaborative mapping of those has been used in clinical mental

health settings (Minuchin) and this might also help in facilitating understanding and development. Links can also be made with interpersonal process research, which with curiosity rather than judgements facilitates collaborative reflections as the foundation for forward action.

Peng (2014), drawing upon his experience at the National Yunlin University of Science & Technology where he is an Associate Professor at the Visual, Culture and Design Unit and his earlier experiences at the Parris VIII University and the University of South Queensland, highlighted that collaboration means that action research should be accessed more on process rather than focusing on simplistic outcomes. In the spirit of true collaboration, the researcher needs to be prepared to walk away from the projects and the projects failing in a narrow sense and in a broader and longer-term sense achieving a consistent development in the various partners so that everyone carries their responsibilities in carrying the project and the hosts of the researcher take the ownership of the project.

In conclusion, I appreciate that the conference presentations were an important vehicle to enhance relational reflections and advance what was achieved through sharing in dyads or smaller groups (e.g. through reflective interviews of the researchers)

Appendix 5: The Up Skilling Project's Management Tools

I experimented with various project management tools that have been used in collaborations involving several people. These included versions of project initiation documents, stakeholder analysis grids, action trackers, communication logs, risk analyses and options appraisals; see Figure 5. Up Skilling project action tracker (anonymised), Figure 6. Up Skilling project checkpoint report (anonymised), Figure 7. Up Skilling project stage plan (anonymised), Figure 8. Up Skilling project risk register (anonymised), Figure 9. Up Skilling project risk scoring matrix and Figure 10. Up Skilling project stakeholder analysis (anonymised). All of these were useful and I have learnt to experiment with various versions of those tools and adapt them to the current circumstances which evolved over time. For example, it was useful to review and reflect on the clarity, economy, overall leanness and utility of these tools and adjust them by adding details, making them more succinct or changing their presentation style. All of these interacted with my needs, as well as those of my collaborators.

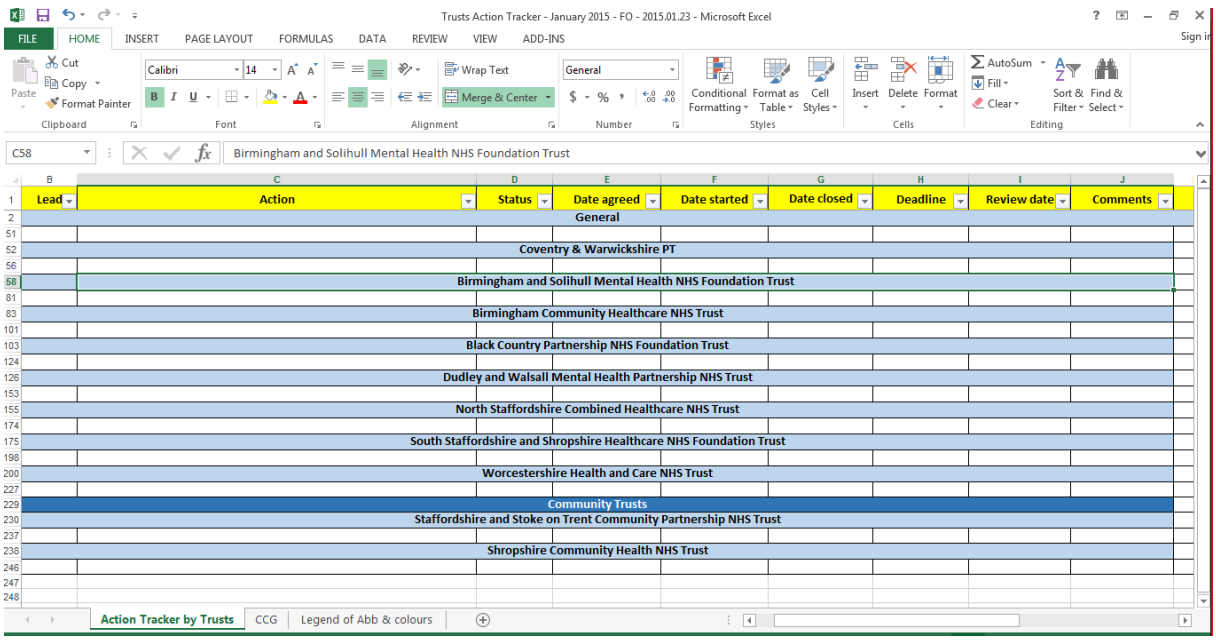


Figure 5. Up Skilling project action tracker (anonymised)

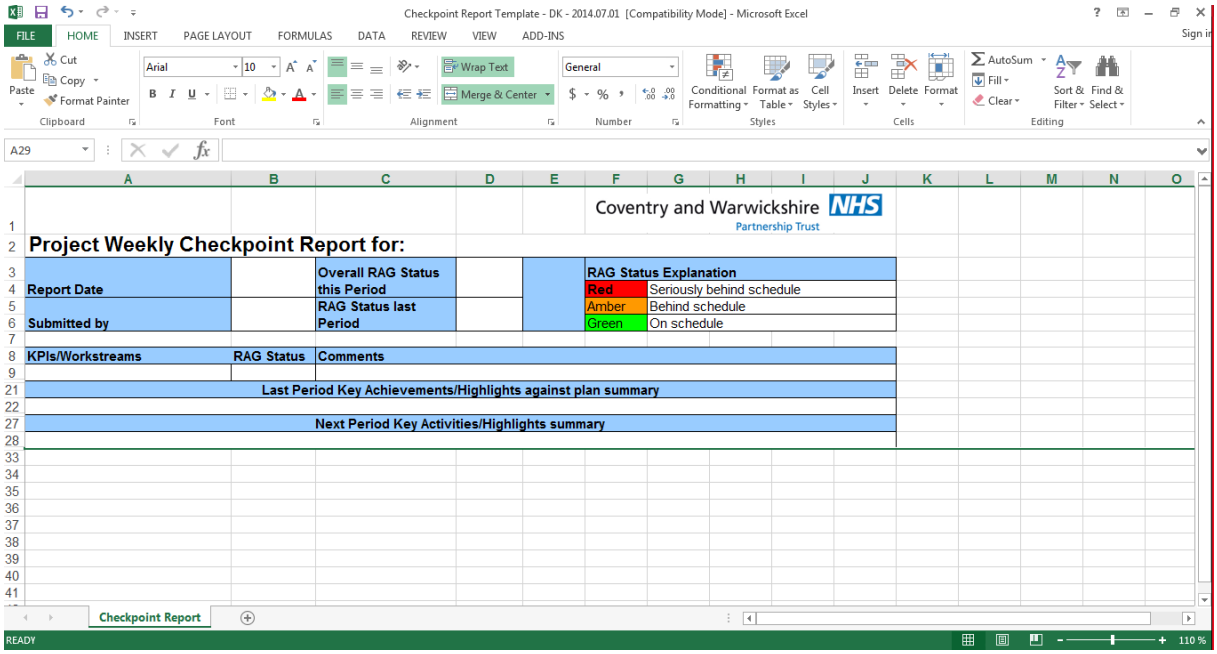


Figure 6. Up Skilling project checkpoint report (anonymised)

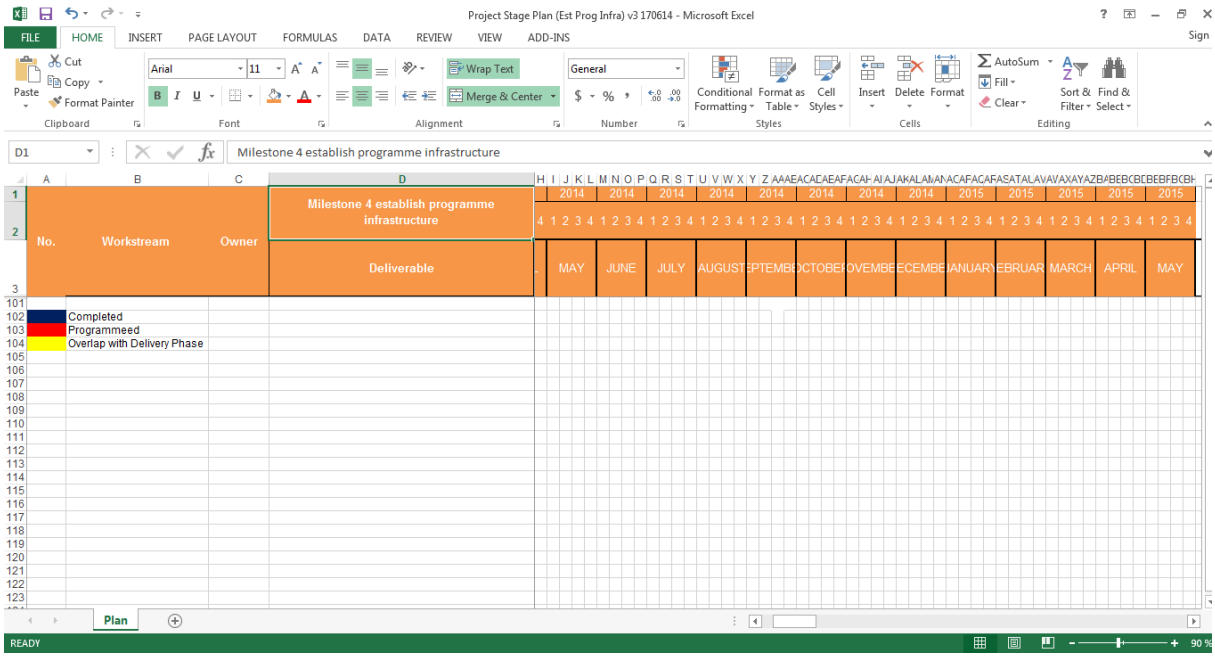
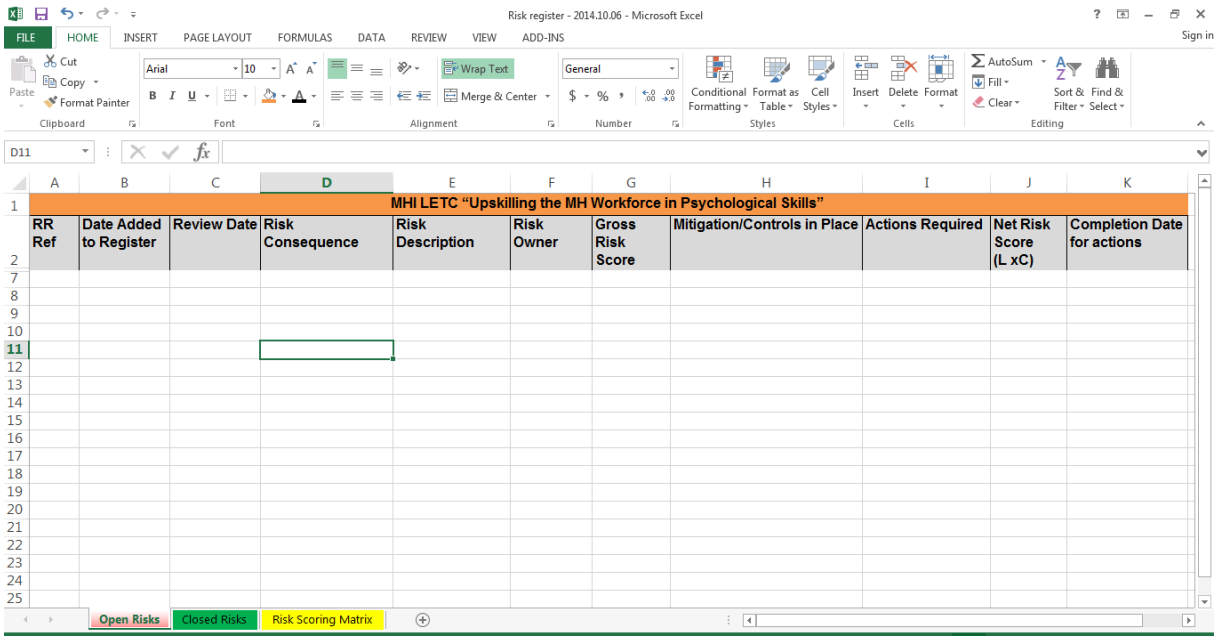


Figure 7. Up Skilling project stage plan (anonymised)

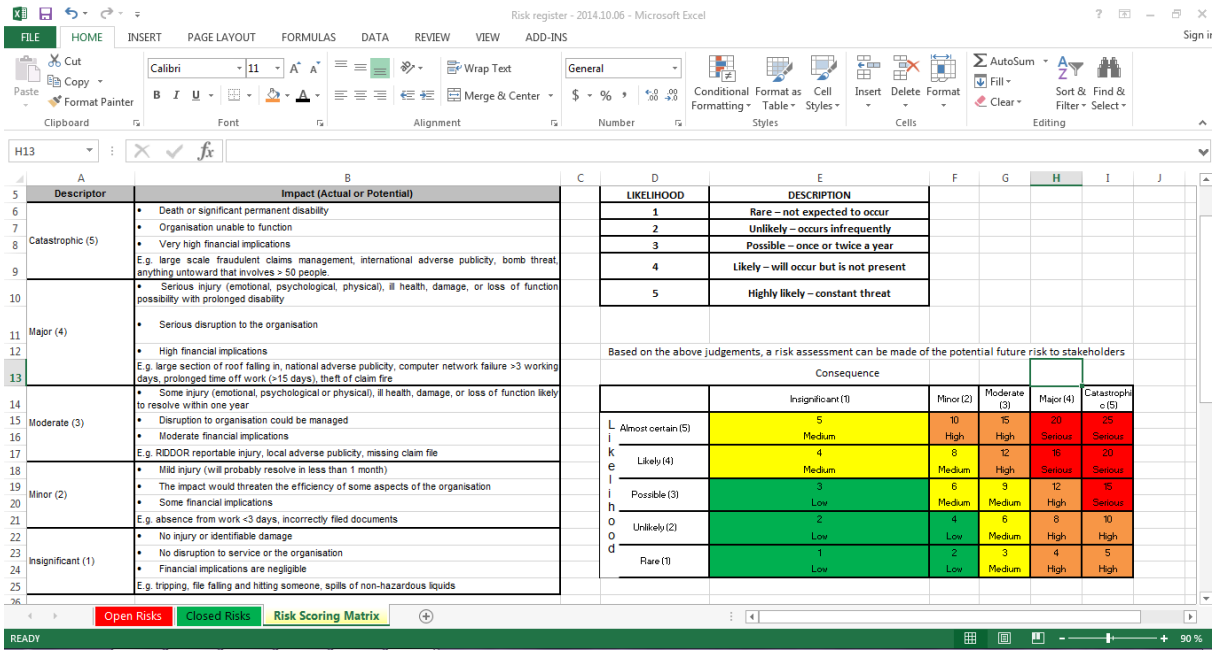


MHI LETC "Upskilling the MH Workforce in Psychological Skills"

RR Ref	Date Added to Register	Review Date	Risk Consequence	Risk Description	Risk Owner	Gross Risk Score	Mitigation/Controls in Place	Actions Required	Net Risk Score (L xC)	Completion Date for actions

Open Risks | Closed Risks | Risk Scoring Matrix

Figure 8. Up Skilling project risk register (anonymised)



Descriptor	Impact (Actual or Potential)
Catastrophic (5)	• Death or significant permanent disability • Organisation unable to function • Very high financial implications E.g. large scale fraudulent claims management, international adverse publicity, bomb threat, anything untoward that involves > 50 people.
Major (4)	• Serious injury (emotional, psychological, physical), ill health, damage, or loss of function possibility with prolonged disability • Serious disruption to the organisation • High financial implications E.g. large section of roof falling in, national adverse publicity, computer network failure >3 working days, prolonged time off work (>15 days), theft of claim fire
Moderate (3)	• Some injury (emotional, psychological or physical), ill health, damage, or loss of function likely to resolve within one year • Disruption to organisation could be managed • Moderate financial implications E.g. RIDDOR reportable injury, local adverse publicity, missing claim file
Minor (2)	• Mild injury (will probably resolve in less than 1 month) • The impact would threaten the efficiency of some aspects of the organisation • Some financial implications E.g. absence from work <3 days, incorrectly filed documents
Insignificant (1)	• No injury or identifiable damage • No disruption to service or the organisation • Financial implications are negligible E.g. tripping, file falling and hitting someone, spills of non-hazardous liquids

LIKELIHOOD	DESCRIPTION
1	Rare – not expected to occur
2	Unlikely – occurs infrequently
3	Possible – once or twice a year
4	Likely – will occur but is not present
5	Highly likely – constant threat

Based on the above judgements, a risk assessment can be made of the potential future risk to stakeholders

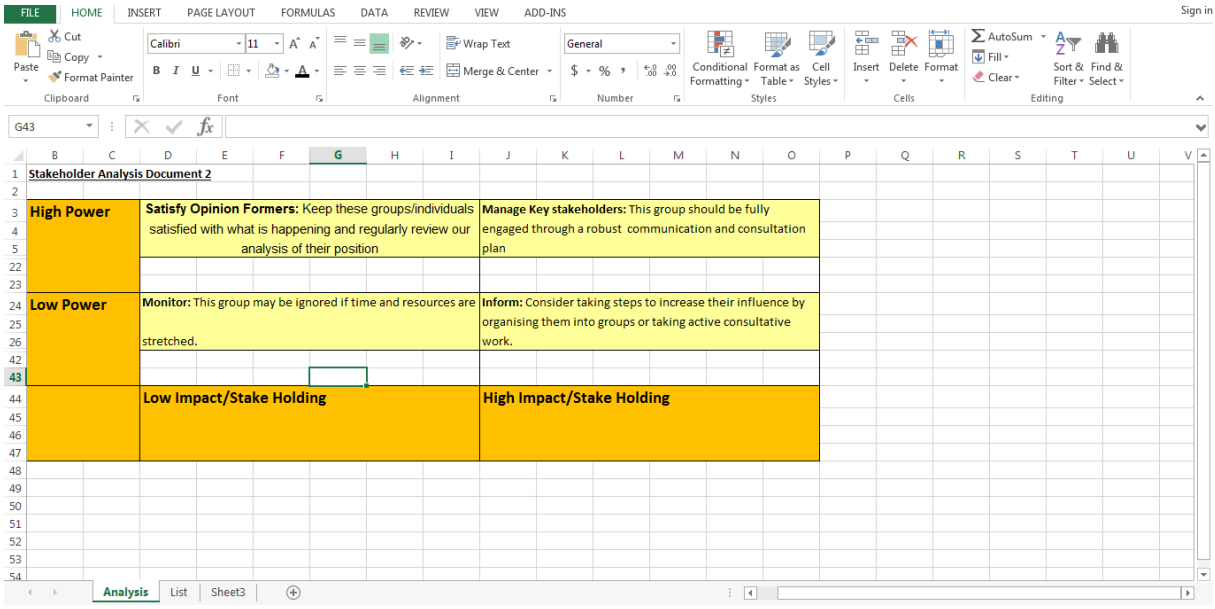
Likelihood	Insignificant (1)	Minor (2)	Moderate (3)	Major (4)	Catastrophic (5)
Almost certain (5)	5 Medium	10 High	15 High	20 Serious	25 Serious
Likely (4)	4 Medium	8 Medium	12 High	16 Serious	20 Serious
Possible (3)	3 Low	6 Medium	9 Medium	12 High	15 Serious
Unlikely (2)	2 Low	4 Low	6 Medium	8 High	10 High
Rare (1)	1 Low	2 Low	3 Medium	4 High	5 High

Consequence

Open Risks | Closed Risks | Risk Scoring Matrix

READY

Figure 9. Up Skilling project risk scoring matrix



Stakeholder Analysis Document 2

High Power	**Satisfy Opinion Formers:** Keep these groups/individuals satisfied with what is happening and regularly review our analysis of their position	**Manage Key stakeholders:** This group should be fully engaged through a robust communication and consultation plan
Low Power	**Monitor:** This group may be ignored if time and resources are stretched.	**Inform:** Consider taking steps to increase their influence by organising them into groups or taking active consultative work.
	Low Impact/Stake Holding	**High Impact/Stake Holding**

Figure 10. Up Skilling project stakeholder analysis (anonymised)

Appendix 6: The European Journal of Counselling Psychology's Publication Process

An element of delegation and collaboration that has generated energy for change is the breaking down of tasks, so that everybody who needs to know will know what the next step is, but also how that fits with the larger picture. We do this through the use of the publishing platform's online action tracker. Figure 11. Print screen from the EJCoP online action tracker illustrates the copy editing section of the action tracker; the online action tracker has many sections but this section does not contain confidential information as the papers mentioned are the ones that have reached the publication stage (I am not providing screenshots from the areas of the action tracker which include confidential information regarding the blind peer review but also about papers that do not reach the publication standard). Similarly, for tasks that are not comprehensively covered by the online action tracker of the publisher's platform, we use additional word processors and spreadsheet-based action trackers. Figure 12. The EJCoP word-processor based local submission action tracker illustrates a word-processor-based action tracker, which compliments and provides a back up to the online system; this form tracks articles from the point of submission to the final outcome through the stages of pre- review assessment, peer review, revisions required and comments from peer review and resubmission. Figure 13. The EJCoP spreadsheet-based local action tracker illustrates a spreadsheet-based action tracker which compliments the online system; this form tracks the requests to peer reviewers including the date of the latest request for each reviewer and how many reviews are active for confidentiality purposes, the figure has hidden rows 5-113.

Figure 11. Print screen from the EJCoP online action tracker

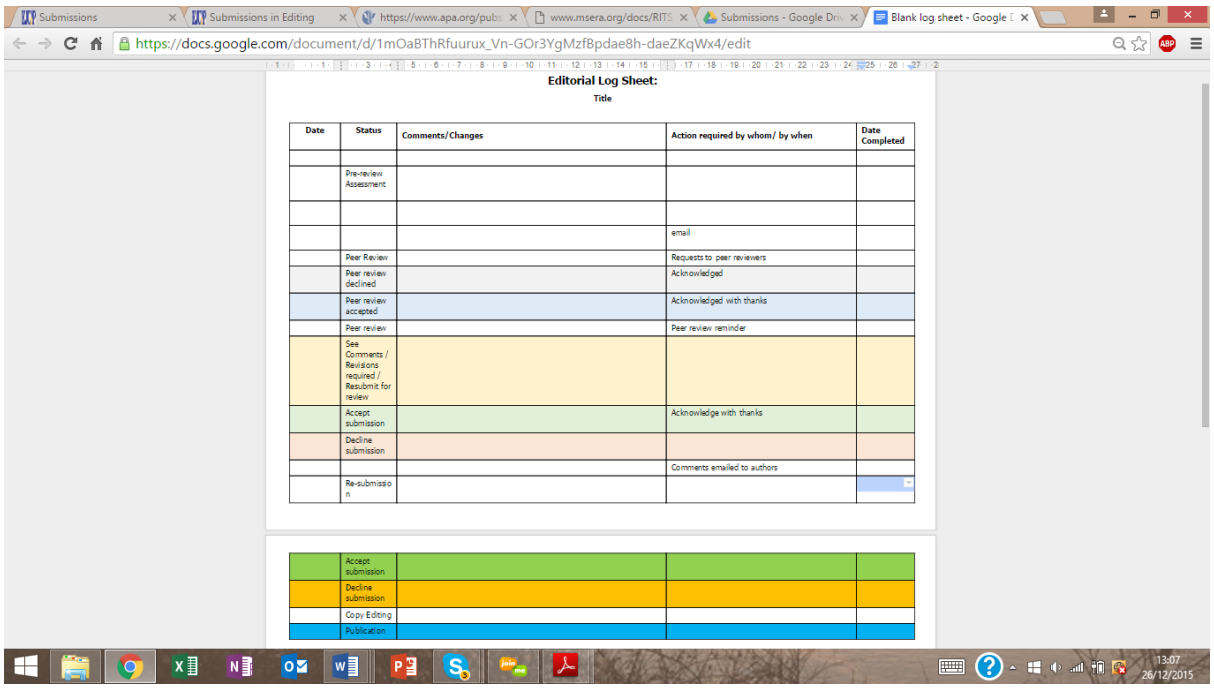


Figure 12. The EJCoP word-processor based local submission action tracker

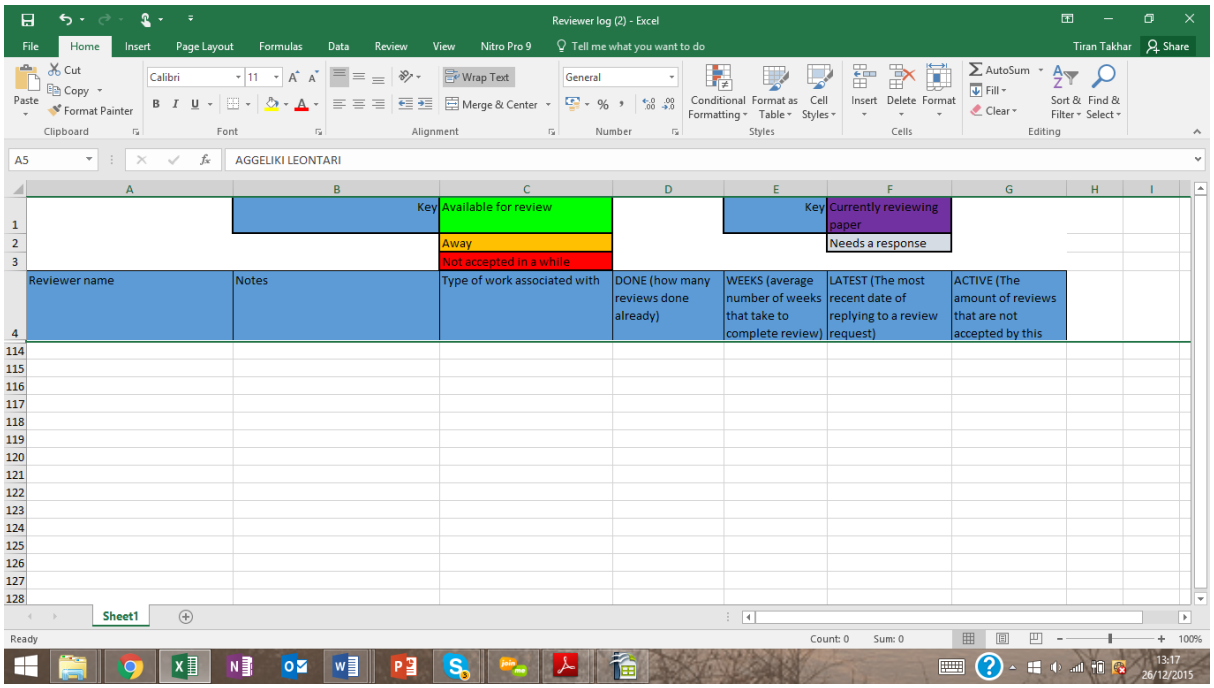


Figure 13. The EJCoP spreadsheet-based local action tracker

Appendix 7: Reflection Form Experimented with (Integrating Questions from Various Texts)

Clarifying the experience of the situation

Description of the incident – content reflection about what happened/is happening

What is the history of the situation? What are the key things that have been attempted/done up to now? [i]

What are my sensory experiences (5 senses) as I recollect this event? [ii]

Do I recollect any different sensory experiences at the time?[iii]

What were my thoughts (or images, shapes and textures) at the time? [iv]

Are my thoughts (or images, shapes and textures) any different at present?[v]

What are my feelings (emotions)? What seem to be the feelings and emotions of others?[vi]

What give me and others linked to this project curiosity, delight and anxiety?[vii]

What metaphors come to mind when I am thinking about what is valuable in what I/we have been doing (any metaphors but also being particularly inquisitive about themes of transformation)[viii]

What matters? [ix]

What prompted me and others to act in this way? What stopped me acting in the way I would have wanted to?[x]

Speculation of why the current situation is as it is[xi]

How do I understand my own experience that I bring to the collaboration? How do I understand the experience of the other participants as they present it?[xii]

A System of Research Dissemination

Have events gone as expected? Was the outcome of the actions what was intended? If yes, what; if no, what? [xiii] What has worked well and why?[xiv]

How have I checked that my understanding fits with what my collaborators are intending?[xv]

Has the course of action generated energy for change?[xvi]

What causal relationships might exist between events? [xvii]

What are the differences between my espoused theories and my theories in use?[xviii]

Any other thoughts regarding why the current situation is as it is

Premise reflections: examination of underlying assumptions and perspectives?

Being *courageous*, what would happen if I did something or did nothing?[xix]

How what seems to go on gets identified and clarified

What are the key assumptions that might be identified underpinning my present understanding in relation to the actions that were taken? (What are my theories in use?)[xx]

What is the evidence that supports my current beliefs? How have I come to understand in this way and not in another?[xxi]

How do the pieces of evidence weigh against each other and themselves (e.g. assess its sufficiency)? [xxii]

Did the assessment at the time of the event differ from the current assessment?[xxiii]

What is learnt about process, e.g. strategies and procedures.

Do I accept/reject or change emergent causal relationships?[xxiv]

A System of Research Dissemination

Identifying possible courses of actions there might be

Is there anyone else who could help us with this?[xxv]

How can we work together to make this happen?[xxvi]

3a. Further reflect on these options

3b. Decide what is the best option forward

What is the ideal and what would you settle for? [xxvii]

How I am intending to utilise this inside my work and life in the near future (maybe in other projects).

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[i] Coghlan (2010) p. 24

[ii] Coghlan (2010) p. 7

[iii] Coghlan (2010) p. 7

[iv] Coghlan (2010) p. 7

[v] Coghlan (2010) p. 7

[vi] Dewar & Sharp (2013) p. 5

[vii] Coghlan (2010) p. 11

[viii] Coghlan (2010) p. 13

[ix] Dewar & Sharp (2013) p. 5

[x] Dewar & Sharp (2013) p. 5

[xi] Coghlan (2010) p. 15

[xii] Coghlan (2010) p. 25

[xiii] Coghlan (2010) p. 24

[xiv] Dewar & Sharp (2013) p. 5

[xv] Coghaln (2010) p. 25?

[xvi] Coghlan (2010) p. 24

[xvii] Coghlan (2010) p. 24

[xviii] Coghlan (2010) p. 16

[xix] Dewar & Sharp (2013) p. 5

[xx] Coghlan (2010) p. 16

[xxi] Coghlan (2010) p. 16

[xxii] Coghlan (2010) p. 8

[xxiii] Coghlan (2010) p. 8

[xxiv] Coghlan (2010) p. 24

[xxv] Dewar & Sharp (2013) p. 5

[xxvi] Dewar & Sharp (2013) p. 5

[xxvii] Dewar & Sharp (2013) p. 5