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CRITICAL REFLECTION ON PRACTICE DEVELOPMENT

Building better relationships: developing critically reflective practice when working preventively with domestic violence and abuse

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Abstract

Background and context: This article presents reflections on critical participatory action research into the development of critically reflective practice, conducted by the first author alongside practitioners who work preventively in the field of domestic violence and abuse. It is part of a doctorate in health science undertaken in response to the need to question assumptions, presuppositions and meaning perspectives in what is a complex and harmful area of interprofessional practice.

Aims: The research aims are to develop knowledge and professional/interprofessional practice in this ill-defined area of practice in two phases – phase 1: creating opportunities for interprofessional critical reflection; and phase 2: examining the impact this has on individual and collective practice. This article offers an emerging framework for critically reflective interprofessional practice, and critical reflections on phase 1 of the study, from the perspective of insider/practitioner/researcher, through the lenses of sincerity and significance in qualitative research.

Implications for practice:

The article concludes by proposing potentially important implications for practice development in the following areas:

- Interprofessional practice
- The conditions required for developing critically reflective practice
- How we reveal, understand and work with power dynamics when working with conflict, violence and abuse

Keywords: Interprofessional practice, domestic abuse, critical reflection, researcher reflexivity

Introduction

Domestic abuse is a complex social phenomenon. It claims the lives of three women each week in the UK (Office for National Statistics, 2016), placing 130,000 children at high risk of significant harm from perpetrators of domestic abuse (Caada, 2014). Responding effectively is a challenge, since multiple factors make professional practice in this arena problematic. Despite notable efforts and developments, we have a long way to go if we are to prevent the harm caused by this widespread and pernicious issue (Home Office, 2016). The preferred terminology for this article is domestic violence and abuse, as these most effectively encompass the wide range of experiences and interventions required across a broad spectrum. In this article, the terms are used interchangeably, to reflect confusion regarding language and interpretation in the interprofessional practice context outlined below.

The problem

Unlike other serious social issues in the UK, domestic abuse is not the responsibility of any one statutory agency or government department, and can be 'the responsibility of many or indeed none' (Malos, 2000, p 122). The challenges are: how domestic violence and abuse are defined and interpreted; the complexities of working preventively with domestic abuse; and the impact that practice in this area has on practitioners. It is clearly a 'worthy topic' (Tracy, 2010, p 840) for research, societally and because it questions taken-for-granted assumptions in domestic abuse prevention practice. This requires critically reflective practice, defined by van Woerkom and Croon (2008, p 317) as:

> *'Connected activities carried out individually or in interaction with others, aimed at optimising individual or collective practices, or critically analysing and trying to change organisational or individual values [including] critical opinion sharing, asking for feedback, challenging group-think, openness about mistakes, experimentation and career awareness.'*

The above definition reflects the interprofessional context for research into the process of developing critically reflective practice when working preventively with domestic violence and abuse. This article also draws upon Fook and Gardner's (2007, p 14) approach to critical reflection as a theory and a process involving:

> *'A deeper look at the premises on which thinking, actions and emotions are based. It is critical when connections are made between these assumptions and the social world as a basis for changed action.'*

Without critical examination of 'frames of reference, including institutions, customs, occupations, ideologies and interests' the transformational potential of reflective practice is limited (Mezirow, 2000, p 24). This article illustrates the first author's experience as an insider/practitioner/researcher (McNiff and Whitehead, 2011) in critical participatory action research (CPAR) (Kemmis et al., 2014). The study aims to develop knowledge and professional/interprofessional practice in the confusing practice landscape of domestic violence and abuse (Westmarland and Kelly, 2016).

Being an insider/practitioner/researcher

Being a practitioner/researcher is an integral aspect of undertaking a professional doctorate, representing the first author's development as a 'researching professional through reflective practice' (Fulton et al., 2013, p 25). Fulton and colleagues further define a researching professional as:

> *'A professional whose actions and decision-making processes are not bound by the traditional way of doing things, who has critical curiosity about their [inter]professional world'* (p 25).

The research sites are areas where the first author practices and conducts professional work, providing independent training, consultancy and practice development in domestic violence and abuse prevention. This involves 'being on the inside looking in' (Greene, 2014, p 1), and brings particular challenges and opportunities. Advantages relate to knowledge of the organisation/field of practice,

well-established professional relationships and access to research participants. However, there are related disadvantages concerned with objectivity and bias, and to mitigate this Tracy's (2010) criteria for excellent qualitative research are used as techniques to guide and interrogate the research process. Tracy (2010, p 840) identifies eight criteria: worthy topic; rich rigour; sincerity; credibility; resonance; significant contribution; ethical; and meaningful coherence. Table 1 summarises criteria relating to sincerity and significance, used as critical lenses for reflection and researcher reflexivity.

Table 1: Criteria for judging the quality of critical reflection in qualitative research

Criteria for quality	**Means, methods and practices through which to achieve it**
Sincerity	The research is characterised by • Self-reflexivity about researcher's subjective values and biases • Transparency about the methods and challenges
Significance	The research makes a significant contribution • Practically • Ethically

Adapted from Tracy (2010)

Summary of the research

I am presenting this outline to give context to my reflection and illustrate the importance of multidisciplinary participation to address the complexity of domestic abuse.

The research is taking place in two phases across three sites across the UK and has received full university research ethics committee approval. Participants are from areas where I practice and work, and include a range of professional disciplines, such as social work, health and education. This article addresses phase 1, which brings practitioners together to develop and transform:

> *'1) their understandings of their practices, 2) the conduct of their practices, and 3) the conditions under which they practice, in order that these things will be more rational (and comprehensible, coherent and reasonable), more productive and sustainable, and more just and inclusive'* (Kemmis et al., 2014, p 67).

Phase 1

Participants, including the first author as insider/practitioner/researcher, undertake interprofessional education activities using a range of techniques to promote critical reflection, including:

- Interprofessional discussion in large and small groups
- Visual and audio media
- Case studies
- Individual and collective critical questioning
- Skills practice sessions

Figure 1 outlines an emerging framework for critically reflective practice, developed from the first author's own practitioner/researcher practice, which is used to guide the interprofessional education activities.

Figure 1: A framework for critically reflective practice

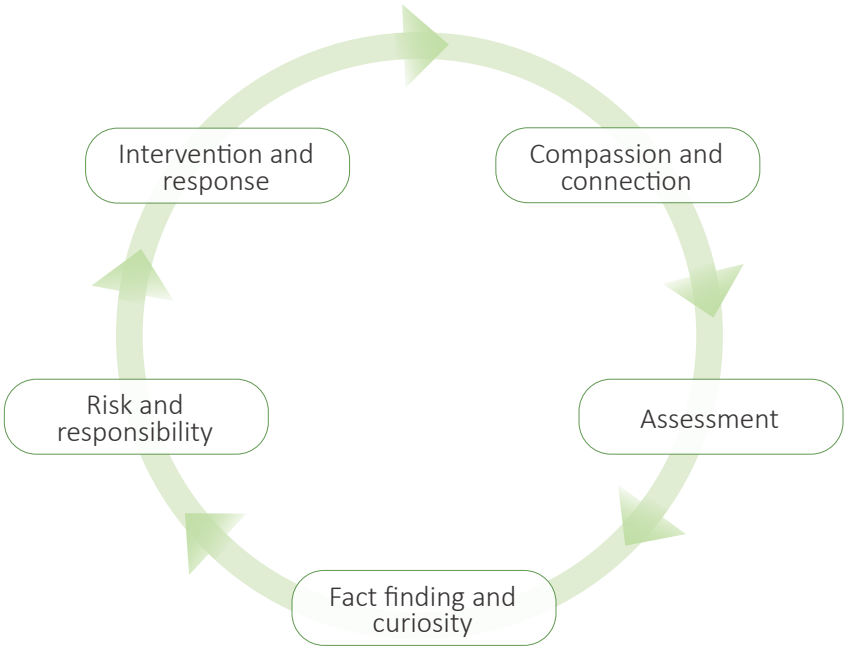

Figure 1 reflects the particular challenges relating to compassion, curiosity, risk, and response present in this area of practice. The framework is the outcome of the first author's own sensemaking process in response to the confusion (Westmarland and Kelly, 2016) and frustration surrounding preventive practice when working with domestic abuse. This process, defined by Odden and Russ (2018, p 191) as:

> *'A dynamic process of building or revising an explanation in order to "figure something out"... One builds this explanation out of a mix of everyday knowledge and formal knowledge by iteratively proposing and connecting up different ideas on the subject.'*

Integration of theory (formal knowledge) and practice (everyday knowledge) has been achieved through participation in socially informed curricula and academic practice-based frameworks. The resulting 'pivotal shifts' in my own awareness and practice have illuminated not only the depth of critical reflection needed to make sense of the problematic aspects of the work but crucially, the breadth of critical reflection required personally, professionally and interprofessionally. This has oriented my personal and professional agency toward more ethical, equitable and socially just ways to work preventively in this complex field.

Developing critically reflective practice

This requires 'a prescribed space for critical reflection – i.e. time and venue – in which to think about the work' (Sully et al., 2008, p 138). Phase 1 of this work fulfils this requirement by creating planned opportunities for critical reflection. Participants attend on a voluntary basis to consider, individually and collectively, the impact of the interprofessional education activities, for practice and continuing practice development, and the implications of critically reflecting on these. The emerging framework (Figure 1) continues to guide the process and focus of practice development. The methods used are designed to promote communicative action, a fundamental element of critical participatory action research, defined by Kemmis et al. (2014, p 35) as happening when people engage in:

> *'A conscious and deliberate effort to reach (a) intersubjective agreement about the ideas and language they are using among participants as a basis for (b) mutual understanding of one another's points of view in order to reach (c) unforced consensus about what to do in a particular situation.'*

The research is multifaceted and involves gathering evidence of reflective, reflexive and mindful practice by all who participate, using:

- Immediate participant feedback
- Audio recording of critically reflective practice sessions
- Participants' reflective logs
- Practitioner/researcher's reflective journal
- Audio recordings of practitioner/researcher's academic and practice supervision

The experience of implementing phase 1 of the study will now be explored under three headings:

i. Immediate participant feedback
ii. Communicative action
iii. My own critical reflections

Immediate participant feedback

Written reflective statements from participants demonstrate that creating opportunities for critical reflection enabled deeper understanding:

> *'It highlights the complexities "other aspects" that need to be taken into consideration when working with families.'*

Participants were able to consider their own reflexive process and broader implications for practice development:

> *'It has made me look at my relationships as well as work environment and how I am towards service user and how self-reflection is so important.'*

However, this did not apply to all participants, as highlighted by the following statement made by one participant during a critically reflective practice session:

> *'I haven't really thought about it [the emerging framework] if I'm completely honest, it's been so busy that we've just been putting one foot in front of another and doing what we need to do and not thinking about anything extra.'*

The conditions in which critically reflective practice is developed are significant. Participants specifically commented on the use of the Swedish concept of Fika, introduced at the beginning of each interprofessional education activity and critically reflective practice session. As a noun, Fika refers to coffee and cake, but as a verb, it is associated with the wider Swedish commitment to quality time, welfare and wellbeing (Morley et al., 2018). One participant summed this up:

> *'Thank you, I feel spoilt for having this opportunity. Lovely group, lovely cake.'*

Such conditions have the potential to impact on the development and fostering of self-compassion:

> *'I am more mindful of safety for myself and others. I'm a lot more reflective and kinder to myself.'*

As self-compassion is the foundation of critically reflexive practice (Waddington, 2017), this is significant. Working preventively with domestic violence and abuse requires practice development that is reflective, reflexive and compassionate. However, as the Dalai Lama (2012) asserts, it is not enough to be compassionate; compassion must be accompanied by action.

Communicative action

Communicative action, a fundamental CPAR principle (Kemmis et al., 2014), was evidenced in phase 1. Members of a CPAR group reached an unforced consensus to strengthen communication between meetings, and maintain motivation for practice change, by establishing a WhatsApp group. Figure 2 is a photograph taken (and reproduced with permission) during the closing session of an interprofessional education activity. The group wanted to symbolise 'togetherness', 'collaboration', 'energy' and 'hope' and lit candles to represent these values. The image is now the icon for the WhatsApp group.

Figure 2: Collaboration and hope

Critical reflection

Here I critically reflect on my experience as a reflexive researcher using the criteria of sincerity and significance outlined in Table 1. Sincerity was achieved through self-reflexivity, vulnerability, honesty and transparency about my biases, joys and mistakes. Significance involved asking questions such as: *'Does this study improve practice [and] contribute to our understanding of social life?'* (Tracy, 2010, pp 845-846).

The process began with a 'pivotal shift' from victim to perpetrator work, a career change for me that involved a change in focus as well as context. This move helped me to understand other professional frames of reference (Hester, 2011; Stanley and Humphreys, 2014) and challenged my previously held assumptions about the (lack of) effectiveness of particular organisations and systems. Working with perpetrators exposed me to critical social theory and the development of critical consciousness; a combination of reflection and action referred to as praxis (Freire, 1970). My understanding of domestic abuse was reframed, from viewing it as an individual phenomenon to a product of wider sociopolitical structures of oppression and inequality, in which we collude.

The need to question assumptions about specific areas of working with domestic abuse is contained in the emerging framework for critically reflective practice (Figure 1). My personal/professional/interprofessional experience, including theoretical influences, are made explicit to participants, upholding principles of reflexivity and transparency. Drawing attention to inequality within organisations, professional systems and society can teach us how power operates, particularly for ourselves and within our own relationships. Placing myself, and my framework for navigating domestic abuse prevention practice, reflexively and transparently in this study is also challenging. I struggle to ensure my own critically reflective process does not overshadow the purpose of the research study. This is accompanied by the challenge of seeing myself as a capable theorist (McNiff and Whitehead, 2011).

Using 'self as instrument' (Tracy, 2010, p 842) has required me to be vulnerable and acknowledge that sometimes – as 'instruments' – we do not have the desired effect, highlighted by the quote from the participant who had 'not had time to think about anything extra'.

The criteria for sincerity and significance have been helpful in overcoming these challenges, remembering that sincere researchers are empathetic, kind, self-aware, and self-deprecating (Tracy, 2010). Cultivating these skills through academic and interprofessional practice supervision has enabled me to maintain the focus of the study. Reflexivity has enabled me to apply rigour in my role as a researching professional, and to keep ethics and attention to 'ethically important moments' (Guillemin and Gillam, 2004, p 261) at the forefront of my research and professional practice.

Emerging implications for practice development

Phase 1 has revealed areas for further practice development in relation to:

- Interprofessional practice
- Conditions for developing critically reflective practice
- How we reveal, understand and work with power dynamics when working with conflict, violence and abuse

Interprofessional practice

Creating opportunities for critical reflection in the context of interprofessional practice can have a significant impact on integrated working. Participants are able to develop understanding, not only of their own frame of reference, but those of other practitioners and organisations. This helps practitioners to reach unforced consensus to integrate different professional perspectives into practice, as demonstrated by the critical participatory action research group's decision to form an interprofessional working group. A framework for critically reflective practice has the potential to turn the rhetoric of 'multi-agency working' into practice reality.

Conditions for developing critically reflective practice

The emerging evidence shows that self-compassion plays a pivotal role in the development of critically reflective transformative practice. However, establishing this is challenging. Gardner (2014) suggested that increasing workloads and pressures on time and resources leave practitioners exhausted, and unable to make time for reflection; ironically, practitioners 'feel less able to access critical reflection at a time when they need it more' (p 2). If self-compassion is to be fostered and developed, the personal and professional challenges for practitioners in accessing a prescribed space, time and venue to critically reflect will need to be overcome.

How we reveal, understand and work with power dynamics

Thus far, this study has revealed the depth and breadth of critically reflective practice (Thompson and Pascal, 2012). Participants develop increasing self-awareness regarding their taken-for-granted assumptions (depth), including the discriminatory discourses and practices that, albeit inadvertently, they have been taking part in. Placing the development of self-awareness in the wider sociopolitical context (breadth), connects directly with the way practitioners live their own life, shining a light on the collective experience of inequality in relationships personally, professionally and interprofessionally.

Conclusion

This article has offered a critically reflective account of the implementation, experiences and emerging implications for practice of the first phase of a critical participatory action research study, and outlined a framework for critically reflective practice. From my perspective as a practitioner/researcher, the reflections form part of the CPAR, and writing this article has informed, consolidated and developed my own critically reflective process, including the development of key principles of reflexivity and compassion/self-compassion. These are essential in the field of domestic violence prevention, and the quest to transform interprofessional practice toward more socially just ends.

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