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RESPONSE TO THE COMMENTARY

Realising participation within an action research project on two care innovation units providing care for older people

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Our thanks for this thoughtful and thought provoking commentary on our article. Several interesting and relevant issues are raised which we would like to respond to below.

As emphasised in both our article and the commentary, the initial actions when setting up research of this kind have far reaching consequences and are vital to the success of the project. The commentator questions our conclusion that this aspect of doing action research is not well discussed in the literature. While we acknowledge that Kemmis (2001) and others, for example, Wicks and Reason (2009), describe the importance of the creation of a 'communicative space' in the early phases of such research projects, we believe that this preparatory phase is rarely evident in the actual models used to represent or summarise the action research process. These models tend to begin with exploration of the current situation; called the reconnaissance phase in Kemmis and McTaggart's (1988) action research spiral which we used in the research described. This model, and others like it, can offer much needed structure and 'navigational support', particularly for novice action researchers, in the messy and complex processes typical of action research. If the very first preparatory steps and the creation of a communicative space are not made explicit, as is the case when an action research model begins with the reconnaissance phase, an unrealistic impression is given of the starting up period; it can seem to those involved that a very long time elapses before the research 'really starts'. It was helpful to us, and other participants, to make the essential early work in our project explicit through addition of 'phase 0' to the model used. Both McArdle (2002) and Bello (2006) commented on the limited detail given in the literature with respect to the experiences of and strategies used by action researchers during this preparatory phase. Agreeing with these authors and others (e.g. Lavie-Ajayi et al., 2007), about the need to share stories and experiences arising from 'phase 0', led to the detailed descriptions in our article about the beginning period of this action research project.

The commentator emphasises the enormous influence exercised by context of care on action research processes, power relationships and the extent to which participation is, or can be, realised within any given project. We agree wholeheartedly. This is certainly our experience within care for older people in The Netherlands, where, historically, a more hierarchical culture was usual in which most stakeholder groups were neither expected nor used to having or exercising influence. Taking account of historical and current contextual influences on power relationships was of daily importance in the research we described. We paid more attention in the article, however, to the strategies used and found effective in tackling such mismatches of power and barriers to participation. We see how paying more explicit attention to the hidden assumptions and power relationships present in the relevant contexts would have rounded out our analysis and interpretation of the ways in which participation was, and was not, enabled within the project described.

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Such an examination may have shed more light on a particular challenge we faced during the first action cycle of this project; that of client and family participation. As the commentator points out, and as we briefly explained in the article, the level of client and family participation in the research actually decreased during the first action cycle, on both units, as participation of professional groups increased. As Jacobs (2006) illustrates, working towards empowerment of all participants and stakeholder groups is immensely challenging, certainly when using 'bottom-up' processes such as action research in 'top-down' oriented organisational cultures. She points out that the varying ideas held by different (professional) groups about the goals, value and meaning of participation can lead to tension within projects in which empowerment of all stakeholder groups is a goal. She stresses that such processes are seldom smooth and argues for a 'realist' as opposed to a 'purist' approach. We feel that our approach was indeed realist in that we chose to accept this 'bump in the road' and to meet the professionals where they were at, in the first instance, developing our understandings of their viewpoint and the concerns that maintained it. Jacobs' (2010) later work discusses the temptation of using the positional power of more traditional researcher-researched relationships when faced with external pressures such as meeting organisational and academic time goals. In our case the temptation was similar but the pressure came from a clash of values between the initiating researchers and the participating professionals in terms of the goals and value of client and family participation – not just in the research but also in the daily reality of care delivery.

We agree with the commentator that we could have been more explicit in our handling of these issues and in relating our strategies, which focused on consciousness-raising among professionals with respect to the moral, professional and practical consequences of continued exclusion of clients and family members from processes which concerned them. As the research progressed, professionals began in fact to value the feedback sought from family and clients and to see it increasingly as useful, even when the feedback was not positive. Not reported in the article are later action cycles in which professionals themselves became critical of their stance on participation of clients and family members; 'family participation' is in fact the focus of a current action cycle on one of the units.

We would like to respond, in closing, to the issue raised in the commentary around engagement in learning. We agree that differing levels of engagement in learning are evident, if not explicitly discussed, in the article. Aside from the fact that action research explicitly posits learning, within action research, as a goal in itself, one of the aims of this particular project was the enabling of the integration of work and learning on the care innovation units involved in the project. As the commentator suggests, this rich and fruitful discussion lends itself to a separate paper. A proposed article by Snoeren et al. (work in progress) focuses indeed on the value of 'learning on the fly', examining the processes of accidental and implicit learning while engaged in 'doing'.

We would like to thank the commentator, once again, for the thought provoking commentary and the editors for this chance to respond. We hope we have answered some of the issues raised and furthered the discussion.

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