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CRITICAL REFLECTION ON PRACTICE DEVELOPMENT

Appreciative dialogue for co-facilitation in action research and practice development

Belinda Dewar* and Cathy Sharp

*Corresponding author: University of West Scotland, UK
Email: Belinda.dewar@uws.ac.uk

Abstract
Aim: The aim of this article is to discuss the role of appreciative dialogue in facilitation of practice development and action research. The authors discuss the definition of facilitation and the lack of specific guidance about the *how* of facilitation. They propose the approach of appreciative dialogue as an important contribution to supporting those involved in developing the practice of co-facilitation. An approach to appreciative dialogue is highlighted – the seven Cs of caring conversations.
Conclusions: The authors conclude that this approach helps to liberate, legitimise and share the emotional and tacit elements of the work, enhance the quality of and participation in the dialogue and provide appreciative feedback about what works well, as a basis for tackling further issues and difficulties. They suggest that facilitation incorporates the process of animation where appreciative dialogue motivates participants to identify existing good practice, brings this to life and propels mutual learning and collaborative action. This helps to shift from an implicit facilitator-led process to a shared and dynamic facilitative process that supports the embedding of change and practice development. Appreciative dialogue also has important implications for many areas of professional practice that seek to work in more strengths or assets based ways and promote co-production through more active engagement of both clients and staff in service design and delivery. Through supporting change for practitioners it creates new and wider challenges for organisations and the wider systems of which they are a part.
Implications for practice:
- Provides feedback about what is working well as a basis for forward development and motivation
- Provides a framework for questioning and co-analysis that is crucial to developing skills of facilitation
- Supports a shift from facilitator-led to a co-production model, where there is active engagement in service design and delivery

Keywords: Facilitation, action research, practice development, animation, appreciative dialogue, inquiry, co-facilitation, co-production

Introduction: what is facilitation and what is it for?
There are many references in the literature to the presence and importance of the skilled facilitator role for the development of participatory practices in research and development, and management (Meyer, 1999; Wadsworth, 2001; Manley and McCormack, 2003; Dewing et al., 2004; McCormack et al., 2006; Stetler et al., 2006; Burns, 2007; Webster and Dewing, 2007; Raelin, 2012). Indeed there is

evidence from many action research and practice development initiatives that facilitation plays a key role in its success (Harvey et al., 2002, Hogan, 2002; Rycroft-Malone et al., 2004; Thomas, 2008).

'Facilitation' is frequently referred to as a process of supporting people to learn. Among the many definitions statements include, to make easy, the art of ensuring that all voices are heard (MacKewn 2008). Kitson et al. (1998, p 152) describe facilitation in the context of practice development as 'a technique by which one person makes it easier for others'. Harvey et al. (2002), in their comprehensive concept analysis of facilitation, describe the purpose of facilitation as being twofold: to help and support people to achieve specific goals, and to enable teams and individuals to analyse, reflect and change their attitudes, behaviours and ways of working. The emphasis is on challenging existing practice, so there is an assumption that it needs to be changed; this can be interpreted defensively by those involved and therefore has the potential to limit engagement in the process (Dewar and Nolan, 2013). Other authors have identified models for effective facilitation of practice development and improvement (Rhydderch et al., 2006; Crisp and Wilson, 2011). While these models can help provide a framework for effective facilitation, there is a danger that the term be misunderstood as denoting a step by step process with a lack of attention to the process, skills required and assumptions about role and purpose.

In this article we focus on the *how* of effective facilitation. Here, we are interested specifically in the meaning of facilitation to support learning and reflection in practice development and action research, and in exploring the power of an appreciative approach to facilitation of dialogue to animate learning and change. In action research, participants become researchers of their own practice as co-researchers in the collaborative inquiry process. They develop their own practice-based theory, test it in practice in their particular context and refine it.

As action researchers, we see facilitation as a means to promote appreciative cultures of inquiry and engagement to develop practice through mutual learning and collaborative action. There are opportunities to do this at individual, organisational and systemic levels. We see the main purpose of facilitation as to promote an *appreciative dialogue*. That is, dialogue in the sense of enabling us to talk to each other about what we aspire to do, and appreciative in the sense of supporting people to engage in meaningful conversations that help them analyse and articulate *what works well* and when. This raises these positive practices to consciousness and motivates practitioners to make this way of behaving happen more often.

The importance of appreciative dialogue
In the literature, dialogue is seen as a form of collaboration through looking together (Bohm, 1996) or 'thinking together' (Issacs, 1999, p 3). Dialogue may be emancipatory and transformative (Habermas, 1984). Dialogue is developmental and exploratory and so understandings of its meaning and the approaches it may encompass are continuously unfolding. Raelin (2012) has identified five principles associated with collaborative dialogical processes. These are:
- Non-judgemental inquiry
- The offer of one's own judgements and assumptions for the critical scrutiny of others
- Equality of opportunity to influence the flow of conversation and decisions
- A process free from manipulation and inauthentic expression
- The express intention to create something new or reconstruct participants views of reality

Examples of strategies to enhance dialogue are shown in Table 1 (below).

> ### Table 1: Examples of strategies to enhance dialogue
>
> - Starting with a clear framing of shared overall goals and future orientation
> - Co-generation of ways of working, including shared responsibilities for noticing how the process is working
> - Attention to the creation of a safe space for sharing, for example through playful and purposeful icebreakers
> - Modelling open appreciative questioning
> - Surfacing and sharing assumptions – both explicit and tacit, individual and collective
> - Encouraging an appreciation of the significance of emotions of all kinds
> - Developing a pace that recognises the diversity among the participants and doesn't push people too quickly to a conclusion

The basic idea of inquiring appreciatively is that in every situation something works well and that if we take time to appreciate what works well and understand why, this can inspire change and development (Cooperrider and Srivastva, 1987; Hornstrup and Johansen, 2009). It is a relational process that focuses on creative conversations between people, and where the outcome is co-created. Through careful questioning the approach consistently uncovers, through conversation, the hidden creative potential in any situation.

In these conversations, the questions focus on the language we use and how this creates purpose and understanding, the relationships we create and the context within which we work. The usefulness of this approach to facilitation is in its generative capacity. This has been described as the:

> *'Capacity to challenge the guiding assumptions of the culture, to raise fundamental questions regarding contemporary social life, to foster reconsideration of that which is "taken for granted" and thereby furnish new alternatives for social actions'* (Gergen, 1994, p 4).

It is important to note that to be appreciative is to take a 'stance'; it is not neutral. It rests on an assumption that something works (see p1), at least some of the time. This approach can be counter-cultural by disrupting norms. Indeed the very act of being appreciative can be provocative since the prevailing culture across health and social care can problem focused and based on deficit thinking and blame. The conceptual and emotional surprise can create a helpful signal of different intent and supports 'unlearning' in a way that can ease feelings of defensiveness.

Developing the *how* of appreciative dialogue

Much of the literature that discusses facilitation in action research and practice development talks about the importance of strategies such as developing a shared vision, enhancing ownership, stakeholder analysis, inclusion, valuing diversity and promoting reflective learning (McCormack et al., 2006). Wadsworth (2001) identifies six key facilitation capabilities. These are:

- Knowing self, knowing others
- Realising interconnectedness
- Identifying the new growth and driving energies
- Resourcing the effort
- Shaping the inquiry
- Accompanying the transformative moments

While helpful, these strategies and capabilities tend to relate to the role of a facilitator and there is little guidance about how to realise them in practice. Appreciative dialogue would be a way of realising these capacities and of supporting participants themselves to become more facilitative.

Appreciative dialogue can be facilitated by careful curious questioning aimed at asking people to consider possibilities, to try to understand why specific actions work well and to engage emotionally

with each other using affirmative language. This is done in the context of the relationship. It happens in day to day conversations. A framework of caring conversations has been developed to support appreciative dialogue; it arose through analysis of more than 240 hours' observation of practice, and eliciting stories about the experience of caring in an acute ward for older people (Dewar, 2011; Dewar and Nolan, 2013). The study was conducted as an appreciative inquiry (Dewar and Mackay, 2010).

The framework asks that we consider seven key attributes in our interactions aimed at supporting learning and action (the seven Cs). These are:
- Be *courageous*. What would happen if I did something or did nothing?
- *Connect* emotionally. How do you feel about what I have said?
- Be *curious*. Help me to understand what happened
- *Collaborate*. Is there anyone else who could help us with this?
- *Consider* other perspectives. What would others say?
- *Compromise*. What is the ideal and what would you settle for?
- *Celebrate*. What has worked well and why?

Table 2 (below) illustrates these attributes and highlights dimensions of each, with possible questions. It is interesting to note the key elements that rarely feature in other interpersonal frameworks: 'be courageous' and 'celebrate'. These elements make this framework unique.

Table 2: Attributes and dimensions of caring conversations (Dewar, 2013)		
Key attribute	**Dimensions**	**Key questions/statements that support the attribute in action**
Being *courageous*	• Courage to ask questions and hear responses • Trying things out • Feeling brave to take a risk	• What matters? • Help me to understand why you have done that? • What would happen if we gave this a go?
Connecting emotionally	• Inviting people to share how they are feeling • Noticing how you are feeling and sharing this	• How did this make you feel? • I feel... • You made a difference to my day because...
Being *curious*	• Asking curious questions about even the smallest of happenings • Looking for the other side of something that's said, and checking things out • Looking for the sense in what other people are saying • Suspending certainties	• What strikes you about this? • Help me to understand what is happening here • What prompted you to act in this way? • What helped this to happen? • What stopped you acting in the way you would have wanted to?
Being *collaborative*	• Talking together, involving people in decisions, bringing people on board, and developing a shared responsibility for actions • Constantly checking out with others if your interpretation is accurate • Looking for the good in others to encourage participation and collaboration	• How can we work together to make this happen? • What do you need to help you to make this happen? • How would you like to be involved? • How would you like me to be involved? • What would the desired goal/success look like for you?
Considering other perspectives	• Creating space to hear about another perspective • Recognising that we are not necessarily the expert • Checking out assumptions • Being open and real about expectations • Recognising that other perspectives may not be the same as yours and feeling comfortable to discuss this in an open way	• Help me to understand where you are coming from • What do others think? • What matters to you? • What do you expect to happen while you are here? • What is real and possible? • What would it look like if we did nothing?
Compromising	• Working hard to suspend judgment and working with the idea of neutrality • Helping the person to articulate what they need and want and share what is possible • Talking together about ways in which we can get the best experience for all	• What is important to you? • What would you like to happen here? • How can we work together to make this happen? • What do you feel you can do to help us to get there? • What would you like me to do?
Celebrating	• Making a point of noticing what works well • Explicitly saying what works well and asking questions that get at the *why* • Continually striving to reframe language to the affirmative	• What worked well here? • Why did it work well? • How can we help this to happen more of the time? • If we had everything we needed what would be the ideal way to do this? • What are our strengths in being able to achieve this? • What is happening now that we can draw on? • I like when you...

In Dewar's study these attributes were already happening in the conversations people had with staff, patients and families to explore what mattered to people and to work together to shape the way things could happen in the future.

Following a process of co-analysis and reflecting the framework back to staff, staff became more conscious of using these attributes in their conversations with others. As the facilitator of the appreciative inquiry in this setting, one of the authors (BD) also became more conscious of how we facilitate conversations that matter. Having a shared and explicit framework for appreciative dialogue, rather than an implicit 'way of working' led by the facilitator of practice development/research, had positive outcomes. The outcomes for staff of using the framework in practice included:

• Feeling brave enough to celebrate and value the practice of others
• Challenging poor practice
• Exploring what mattered to others and feeling calm if their response was different to what was expected or contrary to personal beliefs and values
• Asking others more often what mattered to them and how they felt
• Feeling more confident to share personally with another
• Being clearer about the legitimacy of compromise in the healthcare context

The following quotes from participants in the study sum up these themes:

'The missing part of the jigsaw for me was the patient and family experience. I thought I knew what they needed and wanted by imagining what I would want myself – this was wrong. I know now that checking out with them is part of compassionate care. They may want something quite different to what you think they want.'

'I know how to challenge practice in a way that feels like a conversation.'

'I don't think I said very much before to people about what they did well and explored with them why – I thought development was about helping people to sort out problems. My starting point now is the C of celebration – this helps us with working out solutions to the problems.'

This framework of caring conversations has since been used in a number of contexts, including education, primary care and acute care, where the interaction has focused on facilitation of learning with staff, staff interactions or facilitation of learning and relationship-centred practice in staff/patient and staff/family interactions. Specific activities where this has been used include action learning, user and carer involvement, clinical supervision and stakeholder meetings. The framework has also been used to underpin relationship-centred practice in leadership programmes and to support staff to engage in conversations that support inequality-sensitive practice.

The outcomes for those involved have been transformational, in the sense of changing background assumptions on which actions are based and generating new knowledge rather than just new processes (Bushe and Kassan, 2005). Two examples of how the framework of caring conversations has been used explicitly to guide practice development are illustrated in Table 3 (below).

Table 3: Using the caring conversations framework in practice

'We used the caring conversations as a framework for meetings we were having with senior management. Meetings in the past were not always successful; they could be dominated by information giving, and a controlling style of facilitation. The difficulty was how to develop a shared way of working that we could all sign up to work with. We used the seven Cs of caring conversation as our agreed way of working, our agreed way of having conversations within the meeting. We laid the seven Cs out on the table at the start of every meeting to remind us about our interactions. People began to ask more about how others were feeling, not always to fix things but to explore more deeply why things were happening and to look for possibilities. We would ask questions like "what would be the worst that could happen if we gave this a go?" or "who can we involve to help us?" People started to acknowledge things they did well and also share what they valued about each other within the meeting. Introducing this at staff meetings has changed the way we facilitate learning outside of meetings too. It feels as if there is no going back now – we are different.'
(Clinical nurse manager)

'I used the caring conversations framework to facilitate a discussion with a relative who I had a very poor relationship with. I asked if we could meet. This was the first time I had tried to use the caring conversations. Just connecting emotionally with her – asking how she felt and sharing how I felt, which was frustrated and sad that we did not have a better relationship – helped to open up dialogue. I would never normally say how I felt. We have been learning that feelings are powerful in that they cannot be disputed. I was consciously using the seven Cs in my interaction. It transformed our conversation to one that was balanced and respectful. I asked her at the end if she would mind if I shared some of our learning with other staff on the unit. She said this was not a problem and wondered if I would mind if she could join me in sharing our learning with staff.'
(Care home manager)

Staff have suggested that having the seven Cs is more powerful than having a set of good facilitation questions, as they can develop their own questions from these attributes, which gives them greater ownership. Other quotes that capture what it has meant for people to use this framework on a relationship-centred leadership programme include:

'The seven Cs have helped me to press the pause button and really think about how I am communicating. I have found that by changing the way I interact with others, this in turn has changed the way people interact with me.'

'The seven Cs have really helped me to work properly with others rather than thinking I have all the answers – it has helped me to really connect and work with others.'

'It's all very well saying things like involve people, respect them, include and trust people – but these are just words. Having the seven Cs has helped us to really do what we say and think we do.'

'In the past I would have jumped in with what I thought. Using the seven Cs has meant that I ask more curious questions, and I often find that people know exactly what to do; they just needed me to help them to say it out loud.'

These quotes relate to the concept of animation. Animation is a useful term as it implies action or movement and also that the ideas are already within us (Animarts, 2003). It is useful to think of the role of facilitation as being akin to the process of animation, a suggested by Boud and Miller (1997), which has connotations of giving life and inspiring. This seems to capture explicitly the *way* in which facilitation needs to happen in action research and practice development, where appreciative dialogue

helps to propel mutual learning and collaborative action. The process helps people to work with their own experience and to facilitate their own learning and that of others.

Boud and Miller (1997) identify the following aspects of animation:
• Playback what is heard to help people to consider new possibilities
• Develop confidence in others
• Offer new opportunities for understanding
• Engage with and develop existing cultures
• Introduce lateral and alternative perspectives
• Pose questions

However, these are still couched in terms that assume this is a role rather than a collaborative activity. Animation helps all the participants to become *co-facilitators* or *facilitative participants*. The nature and quality of the questions posed is crucial to all the other important qualities of animation. The act of formulating your own questions rather than responding to the questions of a 'facilitator' and the power of inquiring appreciatively in dialogue with others, unlock the potential for new insights and learning for self and others. We would suggest that a useful way to achieve this is through the caring conversations framework, which provides easily an accessible, transparent and shared approach to learning and co-facilitation.

Summary and conclusions

The caring conversations framework with the seven Cs helps people to engage in an appreciative dialogue aimed at facilitating learning and action. The approach provides greater ownership and emotional connection to the work. The seven Cs provide a shared explicit, yet light, framework for co-analysis. The approach helps to liberate, legitimise and share the emotional and tacit elements of the work, enhance the quality of and participation in the dialogue, and provide appreciative feedback about what works well as a basis for tackling further issues and difficulties. Ultimately, using the framework energises and restores people's connections with work and, by connecting with underlying values and purpose, motivates people to work together. This power of shifting from an implicit facilitator-led process to a clear, shared and dynamic process has important implications for many areas of professional practice that seek to work in ways based on strengths or assets and to promote co-production through active engagement of both clients and staff in service design and delivery (Institute for Public Policy Research and PricewaterhouseCoopers, 2010; Boyle et al., 2010; Scottish Government Public Services Commission, 2011; Glasgow Centre for Population Health, 2011).

Appreciative dialogue cannot be imposed; by changing the way we do things, it makes demands of and creates new challenges for individuals, organisations and the wider systems of which they are a part. That is both the challenge and the prize.

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Belinda Dewar (PhD, MSc, RCN, RCNT), Professor of Practice Improvement, Institute of Care and Practice Improvement, University of West of Scotland, Hamilton, UK.
Cathy Sharp (PhD, PG Dip, BA Hons), Director, Research for Real, Edinburgh, UK.