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Doctor of Philosophy (PhD)

The perceived relevance and benefit of Personal Development modules for social care learners, social care workers and practice educator supervisors.

By

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Declaration

A thesis submitted to the university of Dublin, Trinity College- 2021

I declare that this thesis has not been submitted as an exercise for a degree at this or any other university and it is entirely my own work.

I consent to the examiner retaining a copy of the thesis beyond the examining period, should they so wish

Signed: 

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Date: 30th of June, 2021

Summary

Personal Development (PD) is a mandatory module across the four years of the B.A (Hons) in Social Care work (SCW) at Limerick Institute of Technology (LIT). The aim of this study was to examine if PD is relevant and beneficial to social care work learners (SCLs), practice educators (PEs) and social care workers (SCWs) in their practice. PD is not provided as a stand-alone module by other HEIs offering SCW programmes, hence, the desire to research the topic arose.

The overarching research question “Is the PD module from LIT SCW HE programme relevant and beneficial for SCLs, SCWs and their PEs?” Sub-questions were devised to facilitate answering the main research question and are provided below.

- How are PD, SCW and PEP defined, conceptualised and operationalised?
- How do participants and respondents articulate the content of their learning and their experience of PD as a pedagogical and practice process?
- What role, relevance and benefit, if any, does PD have in SCW education, PEP and SCW practice?

This was a study of retrospective reflection of SCW graduates’ PD experiences, learning and subsequent SCW practice and incorporated a qualitative interpretive case study approach. Semi-structured interviews were convened with 21 SCW graduates and 20 Practice Educators and 12 SCW graduates’ kept personal solicited online weekly diaries for ten weeks.

In order to understand if the PD module from LIT SCW HE programme is relevant and beneficial for SCLs, SCWs and their PEs, the background to SCW and its practice was addressed first in chapter two. The contextualising and operationalising of SCW and selected theories relevant to SCW and its practice was also reviewed in chapter two as a backdrop to PD and PEP. Chapter three focused on the conceptualisation and operationalisation of PD, where PD was defined in a way that correlates with the PD curriculum, LOs, and all the perceived fuzziness in between. A new definition of personal development, informed by the literature, specifically for social care work is

also presented. A new model of the inter-relationship of personal development and social care work was devised. A number of studies with similarities to PD were reviewed, as currently there is a dearth of published studies examining PD for SCLs, SCWs and PEs. Many studies noted the lack of empirical studies around PD, with no studies to date examining how PD modules transfer into practice (LaRocque, 2017; Moller and Rance, 2013; Payne, 2010). It would also seem research that determines potential therapeutic benefits of PD/growth groups to its members is lacking (Eskridge, Ohrt, Reysen and Young, 2013). Kivlighan III, Adams, Obrecht, Kim, Ward and Latino (2019) suggests research to examine processes of these groups connected to attaining development as a learner is required. Chapter three is also the bedrock of the methodology chosen for this research, in so far as, PD was the case under examination. The initial focus of chapter four was to provide a brief outline of SCW education and LIT SCW programme and curriculum. PEP, another core element of the SCW programme and its potential, along with PD, to provide transformative learning experiences was examined. PD, in the context of this research, is first and foremost situated within a teaching and learning pedagogy. It is only after four years of PD learning that PD can be examined in terms of its relevance and benefit to SCWs and PEs practice. Chapter five was devoted to describing the case study approach followed by the qualitative research methods adopted and the reasoning behind why they were deemed the most appropriate for this study. Ethical considerations followed in addition to outlining how the generated data was analysed.

Chapter six, seven and eight contain the findings for this study. Overall, the findings indicate that it took some time for the participants to engage with PD, it was only by 4th year that all participants were engaging with and acknowledging the importance of PD. Elements of the PD module and curriculum were deemed relevant to the participants with PD transferable to both the personal and professional lives of the participants. Elements such as triggers, contemplative pedagogies, confidence, self-care, assertiveness, self-awareness, boundaries, family, loss and grief and RP were reported as transferable to practice. The participants noted the difference between colleagues with and without PD learning. PD did not seem transferable to the majority of participants' first PEP but did have relevance for many during their second PEP, either at the time or retrospectively and depending on the intensity or difficulty associated with the PEP. However, PEs disagree when compared to SCLs from other HEIs, PEs believe SCLs are utilising their PD learning from LIT during their PEPs and

in their practice following graduation. The respondents were aware of their feelings and emotions and were open to discussing these in supervision. Recognising the need for supervision is also related to RP and self-awareness gained through PD learning. Contemplative pedagogies and other self-care strategies were implemented to recognise triggers and prevent burnout and mental ill-health. Assertiveness provided respondents with the confidence to address concerning issues within their practise. It would seem this research addressed all three of the gaps identified by LaRocque, (2017) and Payne, (2010); Eskridge, (2013) and Kivlighan III et al., (2019) and contributed to new knowledge as outlined in the subsequent chapters of this thesis. This thesis also contributes to new knowledge when it answered Spencer's 2006 plea for information around assessing PD and provides clarity and answers to the following:

we may still need to address a lack of clarity in relation to personal development training. What do we really mean by it? How we can help all students achieve it? How can we assess students' personal development? How do we really know when students are not engaging in personal development work? Can we as a profession afford to devote so much training time to activities which we either don't assess, or don't know how to assess, and for which we have little research evidence of its effective contribution to counsellor development? This is a plea for further debate and research (p. 113).

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I thank my supervisors Prof. Andrew Loxley and Dr. Aidan Seery for accepting me on the PhD programme. Their advice and support was invaluable throughout this process. I am also overwhelmed with gratitude to my contributors/co-constructors (participants and respondents) for providing their insights and experiences. SCW is a demanding career choice and, yet, you made time to relate your experiences of PD, PEP and SCW practice to me. A special word of thanks to my examiners, Professor. Carmel O' Sullivan and Dr. Terry Barrett for accepting the arduous task of examining this work.

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Abstract

Personal Development (PD) is a mandatory module across the four years of the B.A (Hons) in Social Care work (SCW) at Limerick Institute of Technology (LIT). The aim of this study was to examine if PD is relevant and beneficial to social care work learners (SCLs), practice educators (PEs) and social care workers (SCWs) in their practice. PD is not provided as a stand-alone module by other HEIs offering SCW programmes. PD provided by LIT specifically focuses on the personal development of the SCL through 2 hour lecture and 1 hour group work, hence, the desire to research the topic arose. Moller and Rance's (2013) and McMahon and Rodillas' (2020) studies are the most applicable to LIT SCW PD and Green's (2017) Irish study of SCWs in practice without PD or similar learning. The main gaps in the literature surrounds the dearth of published studies referring to PD in SCW programmes but also within similar disciplines. Another gap, referred to by Moller and Rance (2013) and LaRocque (2017) as they quote a number of authors, who suggest empirical support for the effectiveness or ease of applicability of PD in practice settings remains limited. Kivlighan III, Adams, Obrecht, Kim, Ward and Latino (2019) suggests research to examine processes of PD groups connected to attaining development as a learner is required. It seems research that determines potential therapeutic benefits of PD/growth groups to its members is also lacking (Eskridge et al., 2013). This research addressed all of those gaps mentioned above.

This is a study of retrospective reflection of SCW graduates' PD experiences, learning and subsequent practice and incorporated a qualitative interpretive case study approach. Semi-structured interviews were convened with 21 SCW graduates and 20 Practice Educator's and 12 of those SCW graduates' kept personal solicited online weekly diaries for ten consecutive weeks. The research question "Is the PD module from LIT SCW HE programme relevant and beneficial for SCLs, SCWs and their PEs?" Sub-questions were devised to answer the main research question and are provided below:

- How are PD, SCW and PEP defined, conceptualised and operationalised?
- How do participants and respondents articulate the content of their learning and their experience of PD as a pedagogical and practice process?

- What role, relevance and benefit, if any, does PD have in SCW education, PEP and SCW practice?

A new definition of personal development, informed by the literature, specifically for social care work is presented. A new model of the inter-relationship of personal development and social care work was also devised. Additionally, the conceptual interrelationship between personal development, social care work and supervision incorporating the findings can be found in the discussion chapter.

The findings portray the SCWs experiences of PD as a module to its transference to their practice. Unexpectedly, the findings also unearth the difference between SCWs with PD and those without PD. Another unexpected finding refers to the relevance and benefits of PD to the supervision process for SCLs and SCWs.

In conclusion, this research has revealed the perceived benefits and relevance of PD for SCWs and those working with vulnerable people. In particular, participants observed the difference between those with PD learning and those without PD learning. The findings highlighted how practice and physical and mental wellbeing is impacted when PD learning is not provided during SCW education. Gaps in the literature identified and addressed in this research highlighted the importance of PD for SCLs and SCWs personally and when working with vulnerable and at risk individuals.

Table of Contents

Declaration	i
Summary	ii
Acknowledgements.....	v
Abstract.....	vi
Table of Contents.....	viii
List of Figures.....	xii
List of Tables.....	xii
Abbreviations	xiii
Glossary.....	xv
Chapter One: Introduction, Rationale and Research Context	16
1.1 Introduction and background to this research	16
1.2 Rationale.....	17
1.3 The Research Question	18
1.4 Research Design	20
1.5 Methodology	20
1.6 Thesis Layout	21
Chapter Two: The Trajectory of Social Care Work in Ireland.....	23
2.1 Introduction.....	23
2.2 The History of SCW in Ireland	23
2.2.1 From the 18th century to the 20th century	24
2.2.2 The 20 th century to the present	25
2.2.3 Social care work in Ireland Today: Recent legislation and policy	27
2.2.4 Barriers to the emergence of professionalisation in SCW	28
2.3 Social Care Work: The Practice and Practise.....	30
2.3.1 Social care work practice.....	30
2.3.2 Wellbeing and safety for individuals	34
2.3.3 Key Theoretical Concepts.....	35
Theory for practice and practice for theory	37
Adverse Childhood Experiences and Trauma-Informed Care	40
Reflective practice	44
Relationship based interventions.....	48
2.4 Summary	52

Chapter Three: Personal Development	54
3.1 Introduction.....	54
3.2 PD Conceptualised	55
3.3 PD Studies.....	59
3.4 PD Operationalised	68
3.5 Factors Enhancing PD Learning	73
3.6 Characteristics of PD Learning -Elements and Practices.....	88
3.6.1 The concept of self	88
3.6.2 Self-awareness	90
3.6.3 Assertiveness.....	93
3.6.4 Reflection	94
3.6.5 Relationships with self and others	96
3.6.6 Triggers.....	97
3.6.7 Self-esteem.....	98
3.6.8 Self-Care	99
3.6.9 Contemplative pedagogies.....	101
3.7 Summary	102
Chapter Four: Transformative Learning.....	104
4.1 Introduction.....	104
4.2 Social Care Work Curriculum - LIT.....	105
4.3 Practice Education Placement.....	105
4.3.1 What is practice education placement	105
4.3.2 Practice education placement - LIT.....	108
4.3.3 Practice education supervision	109
4.3.4 Professional boundaries.....	111
4.4 Educational Theories Applicable to PD Learning and PEP	113
4.4.1 Student–centered learning and teaching	113
4.4.2 Humanistic educational theories	117
4.4.3 Transformative learning theories.....	124
4.4.4 Threshold concepts	131
4.5 Summary	133
Chapter Five: Research Methodology	134
5.1 Introduction.....	134
5.2 Research Questions and the Conceptual Framework.....	134
5.3 Research Design	135
5.4 Research Approach: The Case Study.....	137
5.5 Samples and Sampling Strategy	139

5.5.1 Pilot study participants.....	140
5.5.2 The participants' profile	142
5.6 Research Methods and Data Generation	143
5.6.1 Data Generation - Semi-Structured Interviews.....	143
5.6.2 Data generation - Solicited Diaries.....	147
5.7 Data Analysis Strategy	151
5.7.1 Thematic Analysis.....	152
5.7.2 Triangulation	156
5.7.3 Trustworthiness, transferability and credibility	157
5.8 Ethics	158
5.8.1 Informed consent	159
5.8.2 Confidentiality	160
5.8.3 Data storage	161
5.8.4 Role of the researcher [reflexivity]	162
5.9 Limitations	163
5.10 Summary	164
Chapter Six: Findings from SCW Graduates	165
6.1 Introduction.....	165
6.2 Theme 1: SCW Learners' Experiences of PDG	166
6.3 Theme 2: The Contribution of PD to SCW Learning.....	170
6.4 Theme 3: Elements of PD Learning Transferred to Practice	176
6.5 Theme 4: SCW Practice With and Without PD Learning	191
6.6 Theme 5: Psychosocial Responses to PD/PD Relevant and Beneficial.....	193
6.7 Summary of SCW Graduate Findings	196
Chapter Seven: Findings from PEs.....	198
7.1 Introduction.....	198
7.2 Theme 1: Practice Educators' Experiences of PDG	198
7.3 Theme 2: The Contribution of PD to SCW Learning-Theory or PD	203
7.4 Theme 3: Elements of PD Learning Transferred to Practice	207
7.5 Theme 4: SCW Practice Without PD Learning.....	214
7.6 Theme 5: Psychosocial Responses to PD/Relevance and Benefit of PD	219
7.7 Summary of Findings related to PEs.....	224
Chapter Eight: Findings from Online Diaries	226
8.1 Introduction.....	226
8.2 Theme 1: What Occurred to Bring PD to Mind	227
8.3. Theme 2: The Contribution of PD to SCW Learning.....	233
8.4. Theme 3: Elements of PD Learning Transferred to Practice	235

8.5 Summary of SCW Respondents' Findings	245
Chapter Nine: Discussion.....	246
9.1 Introduction.....	246
9.2 Theme 1: Social Care Learners' and Practice Educators' Experiences of PDG.....	247
9.3 Theme 2: The Contribution of PD to SCW Learning	253
9.4 Theme 3: Elements of PD Learning Transferred to Practice	261
9.5 Theme 4: SCW Practice Without PD Learning.....	281
9.6 Summary	286
Chapter Ten: Conclusion and Recommendations.....	289
10.1 Introduction.....	289
10.2 The Research Question	289
<i>10.3 How the Research Sub-questions were answered</i>	<i>289</i>
10.4 Unexpected Findings	291
10.5 Concluding Comments on this research	292
10.6 Limitations of this study	293
10.7 New Knowledge	294
<i>10.8 Recommendations for Further Research.....</i>	<i>295</i>
10.9 Recommendations for Further SCW Practice	296
<i>10.10 Recommendations for further PD Pedagogy.....</i>	<i>297</i>
References.....	299
Appendices.....	369

List of Figures

Figure 1: Research Design	136
Figure 2 : PD modules provide the backbone for SCW and Supervision.....	261
Figure 3 : Commonalities between SCW and PD.....	269

List of Tables

Table 1: The people and services SCWs may work with.....	31
Table 2: Respondents and PD.....	227
Table 3: The Contribution of PD to SCW Learning	233

Abbreviations

ACEs - Adverse Childhood Experiences

BTC - Behaviour(s) that challenge

CB - Challenging behaviour

DA - Data Analysis;

EBP - Evidenced Based Practice

EIP - Evidence Informed Practice

LIT- Limerick Institute of Technology -was granted technological university status and is known as The Technological University of the Shannon: Midlands and Midwest.

LO - Learning outcome/ LOs-Learning outcomes

PBL- Problem Based Learning

PD - Personal Development

PDG - Personal Development groups

PE - Practice educator/PE - Practice educators/PEs

PEP/ PEPs - Practice education placement/Practice education placements

RP- Reflective Practice

SCL/SCLs - Social care learner/ Social care learners

Scl - student-centered-learning.

SCW- Social care worker/social care work (as applicable)

SCWs – Social care workers

SIB - Self injurious behaviour(s)

TA - Thematic Analysis

TIC - Trauma-Informed Care

This research sought the participation of LIT SCW trained participants over three strands of data generation. I would have used the term co-creators of data or research contributors but for ease of distinguishing between the various contributors I have utilised the following terms:

Graduate SCWs = **SCW participants**

Graduate SCWs who are Practice Educators = **PE participants**

Graduate SCWs online diarists = **Respondents**.

Glossary

Individual worked with is utilised where possible as opposed to **service user/client**. Individuals worked with relates to clients and service users'. These are terms that do not always suggest equality and empowerment.

A **psychodynamic** approach includes recognising emotions take centre stage in an individual's behaviour. Conscious and unconscious mental activities are responsible for behaviours exhibited. Individuals' emotional patterns are instrumental in recognising patterns of problematic behaviours across the life span (Hutchison, Charlesworth and Cummings, 2019, p. 34).

Transference relates to

the experiencing of feelings, drives, attitudes, fantasies and defences towards a person in the present which are inappropriate to that person and are a repetition, a displacement of reactions originating in regard to significant persons of early childhood.

This transference is unconsciously displaced on to figures in the present (Greenson, 1967, p. 156).

Counter-transference is the reaction or emotional response to the transference (Mattinson, 1975; Prodgers, 1991).

Cultural capital is the shared meanings that shape a group's attitudes and internal discussion and communications (Bourdieu, 1997).

Practice and practise are incorporated interchangeably. The verb of doing= **Practise**. I use **Practice** as a noun to describe Social Care Work Practice.

Avoidant attachment style is likely to be evident when a hostile, rejecting, or unavailable caregiver erodes trust and safety which can then lead to avoidant attachment styles being observable (Crittenden and Ainsworth, 1989). Also, those displaying an avoidant attachment style are distrustful of others, hold a negative view of others and tend to make poorer choices (Hazan and Shaver, 1987; Gillath and Shaver, 2007).

Chapter One: Introduction, Rationale and Research Context

1.1 Introduction and background to this research (ICERI, 2022 paper in blue)

Social Care Work (SCW) education is predominately the remit of Ireland's Institutes of Technology/Technological Universities. This remit includes providing theoretical training, with practice training supervised by practice educators (PEs). Personal development (PD) is a fundamental component of the B.A in Social Care Work (SCW) programme at (TUS). PD is considered to be one of the core modules of the SCW programme (LIT, 2014). Literature will be examined pertinent to PD within the bounds of LIT SCW PD module and further afield due to the dearth of SCW PD literature. There is not one definitive definition existing for PD with numerous definitions existing. McLeod and McLeod's (2014, p. 9) definition of PD somewhat mirrors the ethos of LIT PD modules and will be reviewed in chapter three. A new definition of personal development, informed by the literature, specifically for social care work is presented in chapter 2. Several PD studies from professions other than PD will be reviewed. Moller and Rance's (2013) and McMahon and Rodillas' (2020) studies are the most applicable to LIT SCW PD and Green's (2017) Irish study of SCW's in practice without PD or similar learning.

An overarching theoretical framework for this study is interpretivism and constructivism where the emphasis is on the socially constructed realities of the participants and respondents. There are a number of methodological theoretical perspectives relevant to this study which are discussed in chapter five. These perspectives have much in common with praxis theories related to SCW; many such theories borrowed from other disciplines including social work, psychology, psychotherapy and counselling. These theories include PD theories, group dynamics, supervision, attachment and relationship theories, transformative learning theory, humanistic and psychodynamic theories, threshold concepts and educational theories. SCW is a profession dedicated to working with vulnerable individuals regardless of the cause of these vulnerabilities. A more in-depth definition of SCW is provided in chapter two. A new model of the inter-relationship of personal development and social care work was devised and is

presented in chapter 9. Additionally, the conceptual interrelationship between personal development, social care work and supervision incorporating the findings can be found in the discussion chapter.

An extensive gap in the literature corresponds to the dearth of studies referring to PD in SCW programmes and, to a lesser extent, within other helping professions. Overall, many of the other helping professions tend to provide PD as a teaching method to model providing groupwork as an element of their future practice, rather than for the personal development/growth attainable for the learner. Another gap is referred to by LaRocque (2017). She quotes a number of authors who suggest empirical support for the effectiveness or ease of applicability of PD in practice settings remains limited.

1.2 Rationale

This research is significant because it is well known and documented that the helping/caring professions attract those who have or are experiencing trauma within their own lives. Zosky (2013) concurs and acknowledges professionals carrying personal trauma will most likely have adopted negative belief systems, with the potential for counter-transference to occur when interacting with others. For this reason, it is imperative that professionals, working in any capacity, with vulnerable individuals have undertaken work on themselves, developed their self-awareness and reflection capabilities, recognise the impact that they have on individuals worked with and vice versa. Furthermore, there is an onus on professionals to know what are most likely to be triggering situations and situations that may test their professional boundaries. Thus the necessity to be self-aware and engage in reflective practice (RP). That said, currently, PD is not provided as a stand-alone module by other HEIs offering SCW programmes. PD provided by TUS specifically focuses on the personal development of the SCL through 2-hour lecture and 1 hour group work. Self-awareness and RP are defined later in chapter two and chapter three.

My rationale for carrying out this research revolves around my teaching and facilitating the PD module, at the centre of this research, over the 4 years of a Level 8, SCW programme at LIT since January 2013. Undertaking a PD module in 2019 for nine months/ten sessions provided me with some additional insight in to how those receiving PD might experience such a module. This PD group (PDG) was co-facilitated, thus further illustrating facilitation styles, communication styles, levels of

safety and how group members could be constrained by parameters and materials provided to the group. Whilst encouraged to speak freely it was within the bounds of material provided and mostly when invited to speak. This topic is addressed further in chapter three.

Prior to teaching and facilitating the PD module, I practised as a SCW for over twenty years; sixteen of those years were without PD learning. However, PD learning was a core module when I undertook an M.A in therapeutic child care. My position is predominately philosophical in nature. A constructivist epistemology, similar to the views of Hannafin, Hill and Land (1997), is a constant thread running through this thesis, whereby “knowledge and context are inextricably connected” (p. 94).

1.3 The Research Question

The overarching research question: “Is the PD module from LIT SCW HE programme relevant and beneficial for SCLs, SCWs and their PEs?” In short, what is the role of the PD module for SCLs in HE, PEs and SCWs and their practice?

PEs supervise SCLs during their two practice education placements (PEPs) of 400 hours respectively. Relevance, sometimes referred to as acceptability, refers to the participants’ perceptions of PD as appropriate in addressing their PD needs with those required for SCW training and practice (Sidani, 2015). The relevance and benefits of PD will be ascertained through seeking answers to the following sub-questions:

- How are PD, SCW and PEP defined, conceptualised and operationalised?
- How do participants and respondents articulate the content of their learning and their experience of PD as a pedagogical and practice process?
- What role, relevance and benefit, if any, does PD have in SCW education, PEP and SCW practice?

Both practical and methodological relevance are important for this study as Streiner and Norman (1995), Goering, Boydell and Pignatiello, (2008) and Sidani, Miranda, Epstein, Bootzin, Cousins and Moritz (2009) explain how relevance can be determined by asking questions of the participants related to their perception of relevance. Relevance, for this thesis, is determined using qualitative methods after the participants have completed their 4th year of their SCW programme. Individual interviews elicit the participants’ views and feedback on the content and activities of

PD, mode of delivery and suggestions for ways to improve the PD module, or disband PD (to be incorporated within other modules as is the practice of the majority of other HEIs' providing SCW programmes). In order for PD to be beneficial, it should be responsive to and meet the personal and professional needs of SCW graduates and future SCLs.

The term beneficial relates to the effectiveness of PD for SCLs, SCWs and PEs. Effectiveness relates to the robustness of the PD module in producing anticipated beneficial outcomes when implemented under less well controlled conditions of practice. The difference PD makes to the personal and professional life of the participants is usually derived from practice based evidence (Vossler, Moller and Cooper, 2015). Yet, very few studies examine the difference PD makes to the personal and professional life. Effectiveness is also that which supports and enables the learning outcomes to be achieved. Effectiveness will be mostly understood from generated data/data analysis, understanding the small details of the participants' and respondents' experiences.

This research was an empirical investigation, through a case study approach, evaluating the role of the PD module for SCLs in HE (Under methodology for ICERI,2022 PAPER) and SCW practice and PEs. This is then narrowed down to evaluate if PD is relevant and beneficial for SCLs/SCWs personally and within their SCW practice. This research was conducted with SCW graduates, who had graduated over a timespan of fifteen years since the programme began in 2003. PEs were also sought with the same graduation history as the SCW graduates but who had also supervised SCLs whilst undertaking their PEP.

I believed the most effective way to seek the above information was through an Interpretive qualitative case study approach. The qualitative data for this case study was generated through multi-methods; 21 semi-structured interviews with SCW graduates, 20 semi-structured interviews with PEs and diary entries from 12 SCW graduates (semi-structured interview participants) who provided one entry per week for ten consecutive weeks. Furthermore, I expected this qualitative design to contribute to understanding the impact of the context and the processes of PD in relation to SCLs and SCWs practice in a way quantitative approaches may not.

Finally, a broad and deep understanding of the relevance and benefits of PD for SCW learning and SCW practice has the potential to improve SCW education in both the classroom and in practice. It is envisaged that the overall research outcomes will be of significance to different stakeholders including individuals worked with, helping professions and programme boards and decision-makers (Sox, 2010; Tunis, 2004).

Overall, this was a study of retrospective reflection on SCW graduates' PD experiences and learning, in addition to experiences and observations of PEs around PD and SCW practice, incorporating an interpretive case study approach.

1.4 Research Design

This research explored the process of PD as an educational and practice pedagogy, in addition to the professional practice of SCW. This research was organised around a qualitative case study research approach and addressed how the questions set out for this research were explored. Taking a case study approach provided the framework to examine PD within a context of HE and SCW practice.

This case study approach incorporated and triangulated multiple sources of data, namely semi-structured interviews and online solicited diaries. I also believed the data generated from this design would be richer due to its multilayer approach. This richness was partly attributed to the fact that the participants had not only been SCLs but were currently SCWs and/or PEs. (ICERI, 2022, pilot study for the paper) This added another dimension to the design, with scope for substantial and far reaching questions suitable for more experienced past SCLs who are now practicing SCWs and/or PEs.

Ethical approval for the current study was granted by TCD (Appendix Q). This study sought information related to the PD experiences of TUS' graduate SCLs having undertaken PEP and who are now practicing SCWs. Another layer to this study is that TUS-SCW graduates who supervise SCLs during their PEP were able to add a further dimension to the study.

1.5 Methodology

The methodology for this research took a case study approach which provided a framework, not only to improve the credibility of this study, but to also examine PD

within a context of HE and SCW practice, incorporating and triangulating multiple sources of data. Data was generated in four phases:

1. Phase 1: a pilot study involving semi-structured interviews with 4 PEs, 3 SCW graduates, and 1 focus group with SCW graduates, in addition to piloting an online diary (9 potential respondents, of which 4 completed the pilot online diary).
2. Phase 2: 21 semi-structured interviews with LIT-SCW graduates.
3. Phase 3: 20 semi-structured interviews with PEs (having attained an LIT-SCW degree which incorporated PD learning), and
4. Phase 4: 10 weekly on line diary entries with 12 of the 21 SCW graduate participants.

Data analysis was undertaken using a reflective thematic analysis framework inspired initially by the work of Braun and Clarke (2006, 2013, 2021).

1.6 Thesis Layout

Chapter one: Introduced this thesis and set out the research question including the sub-questions. A review of the pertinent literature and a description of the methodology adopted for the research set the scene for the remaining chapters.

Chapter Two: Focused on the trajectory of SCW in Ireland.

Chapter Three: PD, at the centre of this research, is conceptualised and operationalised, along with the theories applicable to LIT-SCW PD module. A number of PD studies were reviewed.

Chapter Four: PEP and PD are examined in conjunction with educational theories applicable to PD learning such as student centred learning, transformative and humanistic theories and threshold concepts.

Chapter Five: The methodology adopted was a case study approach which provides a framework, to improve the credibility of this study. This is achieved through examining PD within a context of both HE and SCW practice and also incorporating and triangulating three sources of qualitative data, namely semi-structured interviews with SCW graduates and PEs and qualitative online solicited diaries.

Chapter Six: This chapter presented the first of three findings chapters. This chapter also provided the findings from the data analysis of 21 semi-structured SCW graduate interviews.

Chapter Seven: PEs were the focus of this, the second findings chapter, where the findings from the data analysis of 20 semi-structured SCW PE interviews was presented.

Chapter Eight: The third and final findings chapter presented the findings from 12 of the SCW graduates who kept a 10 week solicited online diary.

Chapter Nine: The findings were discussed in relation to literature that correlates with and refutes the findings. The discussion led to deciphering what inferences could be made from the combined examining of the literature and findings.

Chapter Ten: The thesis was completed with conclusions and recommendations provided. Both the thesis conclusion and recommendations included views on PD for practice and areas of further research.

Chapter Two: The Trajectory of Social Care Work in Ireland

2.1 Introduction

In order to appreciate the significance of PD in the context of SCW, it is important to provide the framework upon which PD rests and provide a reminder of the research question. “Is the PD module from LIT SCW HE programme relevant and beneficial for SCLs, SCWs and their PEs?” PD will be defined, contextualised and operationalised in chapter three. An abridged history of SCW in Ireland is provided in section 2.2, followed by SCW practice and practise in Ireland today in section 2.3 with subsequent sub-sections on wellbeing and safety and key theoretical concepts related to the practice of SCW. Whilst referred to, an in-depth or exhaustive account of CORU’s remit will not be provided, as the main purpose of this chapter is to consider the past and current position of SCW practice in Ireland. Section 2.4 contains a brief summary which serves to conclude the chapter. Appendix F, provides additional information on legislation, policy; appendix G, child abuse investigative reports; appendix H, LIT, its inception and governance and appendix J, LIT SCW curriculum. This next section provides an abridged history of SCW in Ireland

2.2 The History of SCW in Ireland

SCW was formerly known as Child Care until 1990’s. McGregor and Quin (2015, p. 2) remind us that “*the history of the present*” assists conceptually to underscore how the present and the past practices are entwined, the history, a product of the present, and vice versa. In Ireland, SCW has had, and continues to have some shameful times, with regard to how children and adults were looked after. These shameful times threaten to negate the work of those who have worked and continue to work tirelessly and diligently to meet the needs of looked after children and those at risk and vulnerable in society.

The reason I began this chapter with looked after children is that SCW was previously referred to as Child Care Work, Residential Child Care Work and Community Child Care Work. Therefore, it can be seen before we begin with the history, that the initial objective of SCWs was to work with children (0-18 years). Over the years, we have learned that one cannot work with children in isolation; we must include the families

and wider community (Bronfenbrenner, 1979; Gilbert, 2012). From the mid-1990's, there was more importance placed on considering child development, seen to be broadly influenced by the United Nations Convention on the Rights of the Child and its emphasis on children's social, political and legal rights in order to fully meet the needs of young people (Gilbert, 2012). In recent years, these rights have been incorporated to meet the needs of individuals across the lifespan and hence the move from Child Care Worker to SCW. A developmental model of practice emerged during the 1970's, which on paper was averse to institutionalisation. This developmental model of practice was supported with the first major recommendation of the Kennedy Report (1970) on the Industrial and Reformatory School system. "*The committal or admission of children to Residential Care should be considered only when there is no satisfactory alternative*" (p. 6). The chronological policies and legislation that changed the landscape of how looked after children were looked after in Ireland can be viewed in Appendix F. The history of SCW will be divided into centuries, beginning with the 18th century to the 20th century and followed by the 20th century to the present day.

2.2.1 From the 18th century to the 20th century

SCW emerged as a distinct profession to Social Work in Ireland due to the prevalence of an institutional model of care established under the Poor Law Relief Act 1936, particularly for children (Burke, 1987). Social work is defined narrowly in Ireland and, although at least three other professions (youth work, community work and SCW) are described as social work in other European countries, this is not the case in Ireland. In Ireland, the difference between SCWs and Social Workers is that SCWs typically work directly with the individual, day to day, while social workers tend to manage the case of the individual and are responsible for overall management and statutory requirements. From the beginning of the 18th Century to the 1990's, the Catholic church in Ireland, rather than the state, was the main provider of social care. However, during the 1990's, with the institutional decline of the Catholic Church and a steady increase of social problems, the Church responded through gradually decreasing its involvement in the provision of social care (Burke, 1987; Whyte, 1980, Clarke, 2006, p.14 cited in Doyle and Gallagher). Presently, the Catholic Church has, for the most part, withdrawn from the direct provision of social services, transforming its social care organisations into semi-independent state funded organisations whose staff are largely funded by the state. These are in addition to private care providers.

At the beginning of the 20th century, there were 8,000 children detained in industrial schools. By 1969, there were still 31 industrial schools detaining approximately 2000 children. In 1970, 1,700 children were accommodated in 42 orphanages (Raftery and O'Sullivan, 1999). Large numbers of children were also detained in the reformatories. Between 1858 and 1969, a total of 15,899 children were committed to reformatories (Raftery and O'Sullivan, 1999). It was not until the Kennedy Report (1970) that the industrial and reformatory system was exposed as *"far from satisfactory...haphazard and amateurish"* with a *"general lack of awareness of the needs of the child"* (p. 13). The reported recommendations led to the creation of the current child care system, which includes trained staff, special educational supports, and after-care protocols and the inspection body - Health Information and Quality Authority (HIQA). The child care system continued to fail children, The Task Force on Child Care Services (1980) was a committee formed to review The Kennedy Report's (1970) recommendations and their implementation. This report also highlighted gaps within the child care system and suggested that care should be community based, meeting the welfare needs of the children. Twenty one years after the landmark Kennedy Report (1970), eleven years after the Task Force on Child Care Services (1980) and over eighty years following the 1908 Children Act, came the passing into law of the Child Care Act of 1991 to replace the 1908 Act. Health Boards (now Tusla) had an undeniable duty under the 1991 Act, Part II,(3- (1) to *"identify children who were not receiving adequate care and protection"* and to provide them with suitable protection. Unfortunately, the child care system continued to fail children. (See Appendices F and G for further legislation, policy and investigative reports).

2.2.2 The 20th century to the present

Buckley and O'Nolan (2013) calculated, that since the 1990's there have been 29 inquiries culminating in 551 recommendations. Many of these recommendations have not been acted upon and are repeated across a number of inquiry recommendations. (See appendix F and G for further clarification and information). Revelations of abuse and report recommendations led to the gradual re-evaluation of the role and responsibilities of child care workers, now termed SCWs. This re-evaluation occurred regardless of whether SCWs were working for residential or community organisations, state, semi-state or privately funded organisations. The Task Force Report (1980) recommended *"training for child care workers should be of equal standard and of equal status to that of other social workers"* (p. 402).

In 1997, the Labour Court recommended that a Joint Committee on Social Care Professionals be established to clarify the role and professional qualifications of SCWs. This Committee estimated that in 2002 there were approximately 2,904 SCWs: 1,285 working with children in residential services and children in the community and 1,619 working in residential services for adults and children with learning disability (Joint Committee on Social Care Professionals, 2002). However, it was estimated that only 55 per cent of SCWs had a professional qualification and recommended that only professionally qualified staff be employed as SCWs in the future (1997, the Expert Review Group). This led to the government reassessing the professional training of existing and potential SCWs. Williams and Lalor (2001) claim "*the profession [of residential child care] is presently at a young stage in its development*" (p. 73). Additionally, Farrell and O'Doherty (2005, p. 81) acknowledge the "*slow and tortuous process*" of the SCW professionalisation mandate progression.

Another recommendation from the Joint Committee on Social Care Professionals, 2002 Report was that a nationally recognised professional qualification and career structure should be developed for both residential and community SCWs. Share and McElwee (2005, p. 58) claimed that "*it is crucial to the future of social care in Ireland that practitioners themselves engage seriously with the concept of professionalism and begin to discuss what it might mean*". The Health And Social Care Professionals Act (2005) is a legal and formal framework for beginning this process, and it acknowledges and recognises, for the first time, SCWs as professionals, under section 4, alongside other professions such as social workers, psychologists, occupational therapists, and speech and language therapists. This recognition carries obligations for SCWs to, not only perform their duties to a high standard, but to be held accountable for their actions within the role of SCW, and to be held personally liable if they are found to be in any way negligent by the courts. This accountability will be cemented upon registration of SCWs, as stipulated in The Health And Social Care Act (2005) and by CORU, the legal registering body. The Health and Social Care Act (2005) also required existing non-qualified SCWs to qualify as SCWs. From then on, SCWs could not be employed without holding relevant qualifications. Staff employed prior to 2005 were strongly encouraged and facilitated, often full/part funded, to achieve their SCW qualifications, and promotion opportunities for those who did not hold qualifications ceased.

Although legislation and policy making are crucial to safeguarding the vulnerable in our society, by themselves, they cannot guarantee individuals engaging with services will not suffer mistreatment. Hence, the move to professionals' regulatory bodies. CORU is the body responsible in Ireland for regulating health and social care professions established under the Health and Social Care Professionals Act, 2005. CORU's role is to protect the public by promoting high standards of professional conduct, professional education, training and competence amongst Health and Social Care professions (SCI website). Prior to the 2005 Health and Social Care Act, SCW had not required external regulation. CORU's main remit is to "*assure protection of the public*" (CORU.ie). CORU will ensure through its legislative functions that SCWs are held accountable for their practice. Also, registration with CORU aims to offer, in terms of education, a more standardised education curriculum focussing on the wellbeing and safety of all individuals encountered in practice, across all the HEIs providing SCW training. Standardising the education curriculum, I believe, is not a panacea for ensuring individuals wellbeing and safety.

2.2.3 Social care work in Ireland Today: Recent legislation and policy

As mentioned in the previous sections, SCW has emerged from a number of title changes over the years in both practice and education. CORU was established under the Health and Social Care Professionals Act, 2005. CORU's role is to protect the public by promoting high standards of professional conduct, professional education, training and competence amongst Health and Social Care professions. The Social Care Registration Board (SCWRB) has compiled Standards of Proficiency for the education of SCWs (SCWRB, 2017b) and the code of conduct and ethics (SCWRB, 2019) for SCWs. Furthermore, those providing a SCW service will only be permitted to use the term SCW, in relation to themselves, once they have been awarded either a Level 7 or Level 8 approved SCW qualification, as outlined by QQI and CORU (CORU, 2017). It is not the remit of this chapter or thesis to delve in to CORU in any further detail.

The Health and Social Care Act (2005) refers to SCWs as social care practitioners. This differentiates SCW from social work, which is deemed necessary, as often SCW and social work as professions become blurred. This, for the most part, is due to the commonly held belief that SCW and social work are the same profession. By 2005, Farrelly and O'Doherty (2005) were partially correct in concluding that "*the promise of*

official and public definition and acceptance of social care work has [now] become a reality" (p. 81). It was not until 2015 that the SCWs registration board, CORU, was established to put the SCW profession on a legal footing (Social Care Ireland, 2015). However, barriers to the emergence of professionalisation in SCW exist for a number of reasons. Some of those reasons have been referred to in this section. Further barriers will be addressed in the next sub-section.

2.2.4 Barriers to the emergence of professionalisation in SCW

Tovey and Share (2003) confirm professionalism to be *"the process whereby an occupational group is able to claim special or particular status for itself"* (p. 293). Professionalisation opens up new possibilities for legitimising SCW as a profession (Power and Darcy, 2017). Lindsay's (2002) characteristics of professionalism are incorporated into CORU's professional competence goals which include having professional respect and trust, both for individuals worked with and with team members. Despite the previous section outlining how legislation will augment professionalisation, there still remain many obstacles and barriers to this process, as outlined by a number of authors. One of those obstacles to professionalisation includes professional identity. Gallagher and O'Toole (1999, p. 78) identified the issue of professionalisation as *"central to the development of social care work"* but they note that development of a *"coherent professional identity"* was stymied by

a lack of internal unity, fragmentation across qualification level, diverse client and administrative settings, a changing role and exclusion from key policy making structures within the bureaucratic professional hierarchy of state welfare services (Gallagher and O'Toole, 1999, p. 83).

Professional identity is a barrier also identified by Farrelly and O'Doherty (2005); legislating for professionalisation does not automatically make it a reality until a professional identity is carved out by and for SCWs. Moreover, SCW is often discussed in terms of what it is not as opposed to what it is. There was also institutional resistance to professionalisation; lack of organisation within the SCW profession itself (Share and McElwee, 2005), bureaucratic and institutional diversity and fragmentation; and lack of an independent knowledge base (Gallagher and O'Toole, 1999). As such, knowledge and practices were often adapted from other social/helping professions.

Hallstedt and Högström (2005b) argue that the three main sets of actors in a professionalisation project are the practitioners, academic institutions, and the state. However, as of this time, statutory professionalisation and registration has not occurred; it has gained momentum within the past few years. It is noteworthy that Hallstedt and Högström (2005) did not name organisations in this milieu of “actors”. Registration will only benefit SCWs employed as SCWs as opposed to other job titles. With reference to historical abuse outlined in previous sections, and to avoid current or future abuse, individuals requiring a SCW service should be provided with the best accountable and quality service possible. If a SCW is not an amateur, then there is a higher expectation placed upon them to be competent and appropriately educated, thus equipped with appropriate levels of professionalism to deal with relevant situations as they arise. Freidson’s (1991) definition of professional and profession resonates best with me, *“It is not just any kind of work that professionals do. The kind of work they do is esoteric, complex and discretionary in character: it requires theoretical knowledge, skill and judgement”* (p. 194). It is interesting to note that most references to professionalism within a SCW context do not make reference to PD and what it represents and offers in terms of equipping SCW’s to hone their skills, judgment and their reflective practice (RP), and moreover, their abilities to be non-judgemental and self-aware. Thus far, PD has only been glancingly addressed but it will be defined and contextualised further in chapter three.

Returning to professionalism, professionals undertake “Good Work” described by Gardner, Csikszentmihalyi and Damon, (2008) as the meeting of excellence and ethics. Examining the professionals’ values is often overlooked in favour of teaching techniques. Whilst too simplistic a view, SCW itself does share parallels with SCW programmes that solely focus on the theoretical and practice elements of the programme with little or no self-exploration or PD. SCW and SCW programmes collective backgrounds should intersect with an interest in the person in order to understand the professional and their balance between blending expertise with moral and value laden practice. Pellegrino, Veatch and Langan, (1996) also refer to professional practice as “Good Work” noting *“the work they [social care workers] do is believed to be especially important for the wellbeing of individuals and society at large”* (p. 195). The connotation of the term “good work” is unsettling. Historically, the work of caring for the vulnerable in society was associated with good people doing good work and as can be seen in earlier sections of this chapter is, at times, contradictory.

Arguably, at the very least all those who engage in professional work should ideally practice reflectively in order to optimise and improve their practise. Having defined and examined the professionalisation of SCW, it is time now to conceptualise SCW practice and practise.

2.3 Social Care Work: The Practice and Practise

This section will focus on the definition, practice and practise of SCW by incorporating the wellbeing and safety of individuals worked with and some key theoretical concepts.

2.3.1 Social care work practice

SCW is defined as “*a profession committed to the planning and delivery of quality care and other support services for individuals and groups with identified needs*” (Irish Association of Social Care Educators). The agreed definition of SCW practice is the

professional provision of care, protection, support, welfare and advocacy for vulnerable or dependent clients, individually or in group programmes of care, which are based on needs, identified in consultation with the client and delivered through day-to-day shared life experiences. All interventions are based on established best practice and in-depth knowledge of life-span development. (Joint Committee on Social Care Professionals, 2002, p. 9; Irish Association of Social Care Educators). (ICRI paper 2022)

SCW practice is described by CORU as

a relationship based approach to the purposeful planning and provision of care, protection, psychosocial support and advocacy in partnership with vulnerable individuals and groups who experience marginalisation, disadvantage or special needs. Principles of social justice and human rights are central to the practice of Social Care Workers. (Social Care Workers Board, CORU).

SCW practice involves planning and delivery of quality services and supports to work with individuals with discerned needs to empower and work in partnership with them to assist them further develop, integrate and function within society (O'Connor and Murphy, 2006). The individuals' emotional, social, physical, cognitive, and behavioural needs must be understood and met in a person centred approach (Rogers and Carmichael, 2014; Cooper, 2012) (ICRI paper lit review, 2022). In other words, this person centred approach, derived from humanistic psychology, involves SCWs working together in relationship with the individual in a planned or opportunity-led way. This way of working is to empower the individual to live their lives to the best of their

abilities. Humanistic and holistic approaches constantly keep the individual and their needs at the forefront of all interactions and interventions. As Shaw (2017) and Hansen (1999, p.32) proclaim, humanistic approaches are “*effective, and they provide good conceptual framework*” from which to work (ICRI paper lit review, 2022). SCW practice also includes interpersonal and informational actions, therapeutic interventions and strategies aimed at meeting biological, behavioural, cognitive, emotional, interpersonal, intrapersonal, social and environmental needs of the individuals worked with. In other words, evidence based learning (EBL)/evidence informed learning (EIL) and Problem based learning (PBL) (Barrett, 2017) are for the purpose of enriching the quality of life and well-being for those individuals with whom SCWs work. Working with traumatised, vulnerable and at risk populations is often emergency based and requires immediate action. For accountability, theoretical and practice purposes, this work is carried out by qualified SCWs. SCWs are increasingly working within multidisciplinary teams, such as youth offending, community mental health, community SCW, residential care settings and day services. The following table denotes the people and services SCWs may work with:

Table 1: The people and services SCW's may work with

Children and Adolescents in residential care and the community
Juvenile delinquency in community/residential settings
People with special needs – learning or physical impairments.
People with mental health issues
The aging population
Homelessness
Alcohol/drug dependency
Recent/settled immigrants to Ireland including refugees and asylum seekers
Families in crisis
Fostering and adoptive families
Schools and particularly schools for disadvantaged children
Young people's Aftercare (having aged out of care; Child Care Act, 1991)
Youth services

The starting point for SCW practice is building therapeutic working relationships with individuals or groups (Tomlinson, 2004). EBL, EIL and PBL (Barrett, 2017) are secondary to building therapeutic relationships. Winnicott (1960, 1965, 1985); Dockar-Drysdale (1965,1990,1993); Bowlby (1969, 1980); Perry, Pollard, Blakley, Baker, and Vigilante (1996) and many others have written extensively on relationship building and believe growth and development are possible throughout the entire lifespan, and that caring and nurturing relationships are instrumental to this process. Additionally, Stern (2001, 2002, 2004), Schore (1994, 2005), Seigel, J., (2005) and Siegel, D., (2007) also found relationship building positively impacts brain functioning. An ability to build relationships occurs with practice and exposure to individuals and groups during the course of SCLs training. The topic of relationship building is revisited later in this chapter (section 2.3.3) and also in chapter three, the PD chapter.

Early developmental trauma, including all forms of child abuse, disrupted attachments and relationships provides a platform for SCW services to become involved in Child and family SCW. Trauma refers to an experience that creates a sense of fear (Beck, 1992; Furedi, 2005, 2006; Furedi and Bristow, 2008), helplessness, or horror, and which overwhelms a person's resources for coping. The impact of traumatic stress, as highlighted by Hopper, Bassuk and Olivet (2010) *"can be devastating and long-lasting, interfering with a person's sense of safety, ability to self-regulate, sense of self,*

perception of control and self-efficacy, and interpersonal relationships” (p. 131). Relationships with traumatised individuals are key to the healing process whether those individuals are SCLs, SCWs or adults or children worked with. The helping relationship is at the heart of all SCW interventions, as is an ability to build trusting relationships, which is crucial to the success of the interventions (Lyons, 2013). Relationship building relies on the SCWs command of certain interpersonal and intrapersonal skills. These skills will most likely be acquired through life experience, PD, PEPs and professional development modules and eventually, the graduates’ own practice experiences. Yet, as Sellman (2012) explains, today’s graduates are expected to be competent practitioners from the minute they are employed. A pressured role, coupled with the pressure to be competent from the moment of entering into practice, could exert untold negative emotions on the graduate, even more so if they are attempting to reconcile their way of working with a technicist demanding environment, especially if they do not have the skills and confidence to mitigate against such pressures. Individuals require their SCW to be dependable, predictable, working to the best of their ability and upholding the required standards. Dependability is the cornerstone of developing a trusting relationship with the individuals worked with (van Aartsengel and Kurtoglu, 2015). Elements of PD learning and SCW practice have numerous commonalities and I suggest this augments PD learning to seamlessly transfer to SCW practice (Maughan, 2016).

Succinctly explained, SCWs provide a service to individuals/groups regardless of their living or lack of living situations or setting. In order to provide those services, SCWs must first assess, in conjunction with the individual worked with, the individual’s needs. From there, SCWs plan, adopt, develop or create suitable interventions based on EIP and EBP. This evidence is often adopted and adapted from professions other than SCW, and implementation must also be planned, notwithstanding understanding the individual’s developmental processes, needs and requirements. This necessitates SCWs to have, at the very least, honed the skills of providing individual and group therapeutic communication and interactions. Furthermore, the service/interventions provided to individuals should be steeped in empowerment, active listening, empathy, observation, reflective practice, congruence, positive regard, respect, dependability, trust, honesty, self-awareness, enthusiasm, and an openness to work in partnership with other disciplines and organisations. These interventions should aim to achieve positive outcomes, with a focus on an optimum level of physical, mental, and social

health, being achieved whilst also attending to the emotional and social needs of the individual/individuals worked with.

2.3.2 Wellbeing and safety for individuals

Wellbeing and safety for individuals engaging with a SCW service is dependent on SCWs firstly, being aware of the relevant legislation and policies governing their practice and, secondly, understanding themselves and their triggers. Triggers are most often experienced as a physiological, psychological, and/or emotional responses to perceived threats as a result of being transported back to the traumatic event/events through the unintentional exposure to verbal and other stimuli of the senses or felt reminders of a past trauma (Yalom, 2015). Self-awareness will allow the SCW to recognise immediately that they are likely to be or have been triggered. Wellbeing and triggers will be discussed further in sections 2.3.3, throughout chapter three section 3.6.6 and section 4.5.3 of chapter four.

Self-awareness is described by Taylor (2000) as understanding oneself and understanding how oneself is viewed by others; and while connected to mindfulness and emotional intelligence, self-awareness also remains distinct from mindfulness and emotional intelligence (Brown and Ryan, 2003; Richards, Campenni and Muse-Burke, 2010). Self-awareness, is conceptualised by Zahavi, Grünbaum, Parnas (2004) and Richards et al., (2010), as a state of accurate recognition, knowledge or mastery of one's often unspoken feelings, thoughts, motivations and behaviours. Further explanations of self-awareness will follow in chapter three, section 3.6.2. Whilst experiencing triggers is a frightening experience (van der Kolk, 2014), the self-aware SCW will recognise those thoughts and feelings for what they are and set them aside for later examination and reflection or seek immediate support or supervision. If the individual worked with is triggered, the self-aware SCW will not be self-absorbed with wondering what they did wrong and what is going on. Instead, they will be able to soothe and calm the individual they work with and reflect on their own feelings at a later time (Kay, 2018).

Wellbeing and safety for individuals engaging with a service is also dependent on SCWs honesty around how they are impacted by the work and, indeed, how they then affect the individuals they work with (Poole and Greaves, 2012). They must also recognise their capacity to be honest with supervisors and themselves, recognising

stress and the importance of self-care in order to prevent burnout. Inabilities in these areas may skew decision making and interventions (Hutt, Scott, and King, 1983; Magnuson, Wilcoxon and Norem, 2000; Scott, Nolin, and Wilburn, 2006). These inabilities may well have been a factor in some of the historical and present day abuses in residential centres discussed in the previous two sections. See Appendices F and G for further information.

Historically, and perhaps to some extent today, PD, supervision and self-care most likely was not an option for religious orders and those caring for the most vulnerable in society. With no one to support them with their struggles, which most likely were never spoken aloud, if indeed even internally, these struggles may not have been within their awareness. As a result, these carers/guardians may have experienced a range of emotions such as isolation and feelings of being overwhelmed, angry and frustrated. As Freud (1915) explained just because emotions remain unacknowledged does not mean they disappear, they just resurface unexpectedly at inopportune times. According to Freud (1915), the unconscious mind holds mental processes inaccessible to consciousness, nonetheless, these mental processes influence judgments, emotions, feelings, and behaviours which when examined provide insight into previously unexamined emotions (Freud, 1915; Hay, 2019; Wilson, 2004). This in no ways offers an excuse for abusive behaviour but merely possibilities as to why such atrocities occurred and continue to occur. In contrast, legislation, policies and registration bodies overseeing professionalisation of SCW remove the cultural and dated perception of the “goodness” or “wholesomeness” of those working with at risk individuals. As a result, those currently working with vulnerable and at risk individuals are coming under more scrutiny as professionals and will be held legally accountable for their actions as professionals. However, all these oversight mechanisms will not magically inhibit the expression of destructive unconscious forces—or bring those acting out on them to regulatory attention. It is necessary to simultaneously have adequately trained SCWs who are self-aware and know the impact they have on others, recognise their triggers, engage in RP and regular supervision.

2.3.3 Key Theoretical Concepts

Since it is not the primary aim of this thesis to review all aspects of SCW, four of the key overarching theoretical concepts that underpinned my SCW practice, and now my teaching, will be briefly discussed in the next section and its sub-sections. These are

Psychodynamic theory, Adverse Childhood Experiences (ACEs) incorporating Trauma Informed Care (TIC), Reflective Practice (RP) and relationship based interventions. Attachment theory is a feature of all the aforementioned theoretical concepts. The section then concludes by examining the role of theory in SCW practice and how theory emerging from practice features in SCW practice.

SCW is a way of working with people that avoids “*standardised, formula responses to the situation they encounter*” (Thompson, 2015, p. 263). In practice, this translates to finding, in partnership with an individual worked with, a solution specific to their issue, not just using a “one shoe fits all” ideology. Involved in this process is the “....*use of experience, knowledge and theoretical perspectives to guide and inform practice*” (p. 264), in a way that fits the situation and the individual. It is unlikely that any of the CORU SoP or the code of conduct and ethics could mitigate for the myriad of issues and potential feasible solutions without the possibility of there being some restraints placed upon the SCW as they attempt to avoid a “*one shoe fits all*” ideology. Eclecticism is a “Pick n Mix” style of selecting and integrating sources from various schools of thought and practice (Dawson and Moghaddam, 2016; Odom, Hume, Boyd and Stabel, 2012). Eclecticism garners positive outcomes and customised strategies for each individual. Eclecticism may explain why those who write on the topic of SCW/SW theory have not provided a standardised text on what theories should be incorporated into one’s practice, because it varies from individual to individual and situation to situation.

SCW, as stated earlier, demands competent accountable performances, continuous professional development, and personal support, which is where the SoP are beneficial, particularly for recent or unsure graduates (Morrison, 2005, p. 124). We have all been the unsure graduate but what is important for the individuals worked with is that relational connections are forged with them, as opposed to working solely from policies and legislation. Theories, broadly speaking, can be thought of as a “*coherent group of principles, concepts, and ideas organized to explain some observable occurrence or trend*” (Zastrow and Kirst-Ashman, 2016, p. 22). Theories are often similar to fashion, they are either fashionable, stand the test of time or discarded for the next new theory and conceptualisations of what constitutes a theory. As theories are so diverse and varied, it might explain why educators, SCLs, and SCWs struggle with applying theory to practice. This next sub-section addresses this very topic.

Theory for practice and practice for theory

As outlined by Hunt and West (2011) and Urdang (2010), learning psychodynamic theories can enable learners to traverse a “*whirlpool of complex client personalities, affects, defenses, relationships, and behaviors*” (p. 531). Learning psychodynamic theories can enable learners to realise what is transpiring, and the reasons it is transpiring, and to then develop insights as to why their sincerity may be insufficient to prevent the turmoil. Moreover, attaining knowledge about developmental psychology, and the physical and emotional stages (schemas) through which individuals progress, or become and remain stuck in, is just as essential as gaining insight into psychopathological states and chronic characterological problems (Arntz, 2017; Urdang, 2010). I would argue that much of what Arntz and Urdang suggest occurs holistically during PDGs. Urdang (2010) proceeds to remind us that an in-depth and objective view of human behaviour is a major asset in the development of self-reflection and that psychodynamic theory explains the phenomena of transference and counter transference, concepts which are indispensable in developing self-awareness. Trauma Informed Care (TIC) could be viewed as a revival and a more current approach to psychodynamic theories which are discussed further in section 2.3.3.2.

It is understandable why TIC has become popular as a way of working since it provides a framework within which to locate one’s practice and offers a path back in to working psychodynamically. It also offers a way around those not in favour of teaching/working psychodynamically (Sulloway, 1991; Nietz, 2018). TIC involves therapeutic relationships and interventions (mentioned in section 2.3.3.4) with the individuals’ experiences of trauma from the perspective of promoting healing and growth without definitive theoretical frameworks. It appears that within SCW an apathy for applying theory exists. On some level, this is encouraging from the perspective of SCWs reluctance to designate their relational practice with an individual to a theory, thus negating the individuality of the individual and their experiences. On another level, there appears to be apprehension around the notion of theory (Cooper, Hedges and Ashurst, 2014). It is likely this apprehension stems from a lack of research around theories applicable to practice and their adaptability. A UK report on social work education states that “*universities have been allowed to provide too much theory, too much sociology and not enough about spotting things in a family which are wrong*” (Narey, 2014, p. 30), which raises the question of whether SCW education is following

suit. As Payne and Campling (1990) observe “*Many people have difficulty in applying social work theory in practice*” (p.39). Lub’s (2019) Dutch study examined social work practitioners’ use of theory in social work that was geared towards promoting participation of vulnerable groups and found an abundance of theories in this area. However, what Lub (2019) found issue with was their use and integration in practice. His participants found it challenging to incorporate theories in a way that would underpin their work. Many theories appear to be presented for window dressing, and deviated from their original source in the literature, or are narrow in their paradigmatic focus. In addition, alternative theories that could promote or offer better-nuanced participation perspectives are overlooked.

Hicks (2016) also claims that social work has a problem with theory, with the difficulty quite possibly relating to what counts as theory, since there are many conceptualisations of theory. Thyer (1994) argues that it is a waste of time for social work educators to teach theory for practice because they do not do a good job of teaching theory. He asserts that most theories in social work are taught incorrectly, and are invalid, which may lead to ineffective practice. This view is shared by Sharpe, Moriarty, Stevens, Manthorpe and Hussein (2011), with only 40% of graduates surveyed agreeing theories learned from their programme were of benefit in their practice. LIT (2014) graduates survey found from a response rate of seventy-seven, twenty-three (30%) graduates perceived themselves to be very competent in their ability to make links between theory and SCW, forty-one (53%) competent and eleven (14%) moderately competent and two (2.6%) graduates perceived themselves as not confident in their ability to make links between theory and SCW. Since it is impossible to know what theories were studied by graduates in the Sharpe et al., (2011) programme, they cannot be fully compared to the findings from the LIT (2014) study. Furthermore, LIT graduates were not asked to name the theories they were linking to SCW practice. Staempfli, Kunz and Tov (2012) explain that experienced practitioners difficulty in naming their knowledge is due to it being subconscious, as successful practice in pressurised situations requires fast thinking. This is comparable to Schön’s (1983) and Fook’s (2002) view that practice should not solely be derived from theory but from intricate social and historical interpretations that lead to the “*moment of practice*” (p.38). Practitioners, according to McSweeney and Williams (2019), apportion various values to theory, with some fearful of theory being applied too narrowly and, therefore, dangerously. Unlike the LIT (2014) and Sharpe et al., (2011)

studies, McSweeney's (2017) research demonstrates SCWs in Ireland are indifferent and resistant to theoretical education due to its overly academic nature. It is also suggested that theory lacks relevance, especially when competing with practice and experience. When used in practice, theory is viewed as an excuse for behaviour rather than providing answers. Similar to McSweeney and Williams (2019) and McSweeney's (2014, 2017) studies, Dustin (2006) also notes that managers in his UK study are unable to name theories and do not consciously or directly apply theory to their practice. Furthermore, theory is also considered dangerous if applied too narrowly. In Dustin's (2006) study, managers valued practical knowledge over theory.

Another Dutch study found that hiring decisions of social work employers rely upon applicants' personal attributes pertaining to skills and attitude which appear more decisive than theoretical knowledge. Employers assume that personal attributes are difficult to alter, while knowledge can be learned more easily. Furthermore, excellent theoretical knowledge, though highly valued, is associated with fewer abilities, and is inversely related to diminished interest in daily work with individuals (van Bommel, Kwakman and Boshuizen, 2015). This in part could be due to Osmond and O'Connor's (2006) findings that "*practitioners did not appear to have an explicit, comprehensive, coherent research/theory base to their practice*" (p. 17). Also suggested is that practitioners internalise their knowledge, thus rendering them unable to unequivocally communicate their knowledge. McGreggor (2019) suggests paradigms may be a better fit to offer scaffolding around which to ask questions, pose challenges, and be adapted and developed for specific times, spaces and places. In other words, as suggested by Rigaud and MacGowan, (2019) paradigms that are cognisant of the individuality and uniqueness of individuals may be considered a better fit than theory alone.

Trevithick (2017) may alleviate some of the apprehension and uncertainty around theories when she suggests theories and theorising become accessible when conceptualised as explanations. Explanation is accessible to everyone and could include anecdotal experience, common sense, or lay theories all gained from practice or learning experiences (experiential learning). These bottom-up explanations are usually gained from practice. This way of theory building involves refining existing theory or formulating new ones. Whilst Trevithick (2017) does not provide specific theories, perhaps she has provided something much more valuable to SCWs and this

is a lexicon of 80 skills and interventions. The 80 skills and interventions in Trevithick's lexicon have one thing in common; they all rely on the use of self which fits very well with Dewane's (2006, p. 544) operationalised use of self. This paradigm describes five traits: Use of personality, belief systems, relational dynamics, handling anxiety and then finally, self-disclosure. Kohlstaedt (2010) and Heydt and Sherman (2005) understand that self is the main way or means a practitioner has to facilitate change. Moreover, they state

the conscious use of self purposefully and intentionally allows for his or her motivation and capacity to communicate and interact with others in ways that facilitate change ...the skilled worker is purposefully making use of his or her unique manner and style in relating to others and building positive helping relationships with clients is fundamental to ... practice (p. 25).

All this imagining of self is based on therapeutic models of attachment theories, relationship based theories and theories of RP. It is beyond the scope of this thesis to make a comprehensive list of the many theories applicable to SCW (Maclean and Harrison, 2015). Although, some of these pertinent theories and interventions are captured within Adverse Child Experiences (ACEs), relationship based interventions and RP, which will be discussed next.

Adverse Childhood Experiences and Trauma-Informed Care

Until quite recently, attachment theory (Bowlby, 1969,1980; Ainsworth,1978; Fahlberg, 1981; Perry,1999; Stern, 2001, 2002; Howe, 2011 and Cassidy and Shaver, 2016) was one of the most important and prevalent theories for SCW, and while it still is, it has been overshadowed to some extent by the reigniting of the theories concerned with the 10 Adverse Childhood Experiences (ACEs) (see Appendix I). ACEs are associated with the causes of some existing traumas experienced across the lifespan (Felitti, Anda, Nordenberg, Williamson, Spitz and Edwards, 1998). Trauma Informed Care (TIC) is a practise response to ACEs and other experiences of trauma, equally valid and important. These theories have been circling since the 1990's as a result of numerous studies, particularly in the US, but have recently been adapted in Ireland. They are far reaching and a number of theories, including attachment theories, are encapsulated within interventions based on ACEs and TIC. ACEs have been perceived as a public health epidemic because of their high prevalence rates and lifelong chronic negative impact on physical and mental health, including social impacts (Felitti et al., 1998). According to Sun, Patel, Rose-Jacobs, Frank, Black and

Chilton (2017) and Cooke, Racine, Plamondon, Tough and Madigan (2019), maternal ACEs influenced children's risk for poor behavioural outcomes and are significantly associated with their children's developmental difficulties.

It is therefore expected that the individuals worked with will have experienced a number of ACEs, as will a number of their SCWs (an area that is given negligible attention), in addition to vicarious trauma (taking on board the trauma of the individuals worked with) (Figley, 2002; Pryce, J., Shackelford and Pryce, D., 2007; Pearlman and Caringi cited in Courtois and Ford, 2009). TIC is not well defined beyond advocating for an integration of awareness and understanding of trauma into one's practice. However, it is agreed that TIC provides an entire system approach to service delivery, incorporating an understanding of the insidious impact of trauma on individuals' functioning and wellbeing and which works to improve and not further aggravate its effects (Baker, Brown, Wilcox, Verlenden, Black and Grant, 2018; Bloom, 2010, Harris and Fallot, 2001). van der Kolk (2005) explains complex trauma, the most prevalent trauma SCWs encounter in their work and perhaps even personally, as "*the experience of multiple, chronic and prolonged, developmentally adverse traumatic events, most often of an interpersonal nature*" experienced early on in life (p. 402). Exposure to trauma can affect every aspect of children's development and functioning, including brain development, neurochemical pathways, psychosocial adaptation, and preferential responses to subsequent stress and other life experiences (Schnyder and Cloitre, 2016; Perry et al., 1996; Schore and Cordes, 2005). These affects are far reaching into adulthood and intergenerationally.

At risk or vulnerable populations, including those mentioned earlier in this chapter, are even more susceptible to have experienced or are experiencing trauma. TIC offers a framework for providing services to traumatised individuals within a variety of service and educational settings. They are approaches designed to respond promptly and effectively to the impact of trauma (Bloom and Farragher, 2013; Azeem, Aujla, Rammerth, Binsfeld and Jones, 2011; Harris and Fallot, 2001; Hodas, 2006; Hopper et al., 2010; Schnyder and Cloitre, 2016). Despite a lack of consensus on what the main elements of TIC entail and how TIC is implemented, the above authors agree it involves

Workforce development; organizational development; leadership development; adoption of TIC policies, procedures, and protocols; restraint

and seclusion reduction; use of trauma screening; and implementation of trauma-focused interventions (Baker et al., 2018, p. 666).

Operationally, TIC can resemble foundational trauma training for staff on the prevalence of trauma; its impact on development; behaviours as adaptations of and to trauma; relationships as a primary agent of change; an ecological, strengths-focused perspective; and the creation of safe environments that promote control, choice, empowerment, and collaboration (Gerber, 2019; Bryson et al., 2017). All the aforementioned have attachment theory as a thread running through the operational elements of TIC. Attachment theory, as mentioned earlier in this section, is defined by Fahlberg (1988) as *“an affectionate bond between two individuals that endures through space and time and serves to join them emotionally”* (p.13). Maughan (2017) explains how attachment theory research affords a vital developmental framework for making sense of the behaviours and relationship strengths and difficulties individuals bring from their intricate backgrounds. Bowlby (1980) recognises

... intimate attachments to other human beings are the hub around which a person's life revolves, not only when they are an infant or a toddler but throughout adolescence and the years of maturity as well and on to old age” (p. 442).

Attachment theory fits with PD facilitation, PEP and SCW practice within the therapeutic relationship and most especially with TIC theoretical frameworks. (See Appendix V for the three pillars of TIC). At the root of TIC is self-awareness.

Urdang (1999a) suggests self-awareness can be developed academically and in PEP/practice. Academically, self-awareness can be taught through the incorporation of video-labs and observational learning and returning to psychodynamic theories, with their emphasis on the learners' inner-world. It is interesting that Personal Development Groups (PDGs) or similar were not considered a manner through which self-awareness could be integrated into learning. It is possible that Urdang was mitigating the decline in HEI's and community agencies reluctance to engage with humanistic/psychodynamic teaching and practices. The swiftest and most cost effective solutions for education and practice are often the aim. This can also lead to focussing more on the professional self than on the personal self. Whilst Urdang (1999a; 2010) does acknowledge the personal self, it is not given the prominence I believe is required. Once the personal self is unravelled and understood within the context of future practice, the professional self will emerge and grow. Teaching self-

awareness in the manner suggested by Urdang, I believe is dangerous for the learner. As outlined in her paper learners enrol on these programmes carrying their own personal issues. However, “Video-labs” and observational learning and focusing on the learners’ inner world are likely to trigger learners. In addition, what does a learner do when class is over and they are left in distress and turmoil? This, in my view, mirrors what Glumbikova (2020, p. 147) refers to as the self of a technician professional who takes an expression of emotions as something unprofessional. Perceiving emotions as an illegitimate part of SCW and their separation from the practice of SCW, not only prevents SCWs from establishing a relationship with an individual worked with, but it prevents them from working with that individual’s negative emotions. The fact that the self of a reflective SCW accepts the role of emotions in SCW practice enables the worker to work with the emotions and thus to achieve their containment (Bion, 2010).

Self-awareness and forming therapeutic relationships, in my view, develops from direct experiences and not from “video-labs” or observations. It is a gradual process and each learner reaches levels of self-awareness at their own pace. I cannot say I ever taught anyone to be self-aware, but I may have provided the ingredients and an environment conducive to the development of self-awareness. The learning relies on the learner. Ultimately, the by-product is something that makes sense for individual learners and that which is internalised is gained through the PD (defined in chapter three) process as the learner contributes, discloses and journals during and after PDG. However, in agreement with Urdang (2008), this psychodynamic perspective should, not only include the inner world. The outer world, systems, ecological theories, cognitive-behavioural approaches and strengths-based aspects, though not necessarily all at the same time, must be included. She goes on to explain that the learner/SCW who assimilates a psychodynamic aspect in to their practice focuses, not only on how to assist the individuals worked with to control and modify their emotional outburst, they also seek answers discovering what led to these behaviours. PD learning is conducive to this type of practice, firstly through gaining self-awareness and, secondly, implementing RP, prior, during, and after interactions with individuals worked with. This fits with Urdang’s (1991) next expectation. Urdang (1991) goes on to explain how learners should become comfortable tolerating effects and employing them constructively; this will also facilitate their ability to deal with affective material when it is specifically directed at them. Many SCLs are uncomfortable with emotionality, in part related to their own histories, but also because they may not know

“how to sit with it” or what to “do with it” professionally. Thus, another reason why this type of emotive learning cannot and should not occur solely in lecture. This is where the uniqueness of PD gradually and incrementally facilitates SCLs to capture this learning, they internalise this learning at their own pace, and in a way that makes sense to them. There are experiences either in combination or separately and behaviours which are required to gain self-awareness essential for SCW practice. Butler, Carello and Maguin, (2016) and Courtois and Gold (2009) have noted that clinical instruction and training in psychology, social work, and other mental health disciplines has largely lagged behind the apparent need to include traumatic stress in the training curriculum. They go so far as to say excluding information on trauma, an influential aspect of the human experience, with the propensity to derail normal development and often the causation of psychopathology “*defies logic*” (p,12). RP has a role to play in examining our human experiences and is considered next.

Reflective practice

RP is a practice that has its origins in the work of Plato, who tells us the unexamined life is not worth living. We also have Dewey’s (1933, p. 78) five stage reflective model, upon which Kolb (1984, p. 21), Marks-Maran and Rose (1997, p. 128), Jasper (2003, p. 4) and Gibbs (1988, p. 52) developed similar and circular models of their RP frameworks, with each framework relying on sequentially going through stages. RP theorists are many and have varied approaches. That is to say, depending on where the learner is at on their RP learning journey or the situation to be reflected upon in practice, there is a RP template available from the above-mentioned RP theorists that suits the needs of the trainee reflector/ SCL or SCW.

According to Karm (2010, p. 203), the “*ability to reflect is a precondition for professional growth*” and I include PD/personal growth as part of that precondition. This view is based on Land and Gordon’s (2013) belief that RP is “*the desire to explore, to innovate, to seek new insights, unearth new truths, pass on these findings, promote reflection and evaluation, form and transform thinking*” (p. 16). Although all are characteristics necessary to practice SCW, which model of RP should be adopted? Can elements of models be harnessed and combined dependent upon the experience under reflection? Willis (1995, p. 95) recognises the possibility of losing the “*specific quality*” of the experience whilst striving to classify the experience under the stages of reflection, often losing the uniqueness of the experience. Perhaps this is true for the

novice reflector, who initially relies on the necessary stages of a particular reflection model. This will assist the reflector in making meaning from their experiences vital to avoid losing any possible learning from the experience.

Dewey (1933, p. 75) describes this RP or thinking process as the “*cultivation of a variety of alternative suggestions*”, tested only by taking action or “*experimental corroboration*”. This line of thought brings me back to the work of Moon (2002b), who has experienced PD. As an academic, Moon experienced learners engaging with PEP and returned to further explore both reflective and experiential learning, recognising the value of the learning journal for times of ongoing thought. This notion aligns with personal construct theory (PCT) devised by Kelly (1955), indicating one is constantly constructing and reconstructing their world view as they make sense of perceptions. This is precisely what is expected of SCLs, PD and PEP learners. It fits a constructivist view of learning, whereby the thinking fabric of cognition is sufficiently pliable to continuously change, even without accessing new learning material. Equally, it is possible, when necessary, to discern, modify, and absorb learning material with a view to transforming how material is then thought about personally for each learner and inaccessible to others due to the individuality of experiences and perception. This constructivist view of learning also aids both a recognition and/or a relinquishing of recalcitrant thoughts and practices, which is a vital skill for PD and SCWs. Additionally, the impact of an event on the individual and also their impact on the other individual/individuals involved, is also a factor in the outcome of RP. It is for that reason that SCW can be difficult to unequivocally define or for definitive EBP or EIP to be extracted from what occurs between SCW and the individuals worked with; the same outcome is achieved, but there are multiple ways of achieving that same outcome.

Banks (2006) similar to Gardner et al., (2008), note the ability of reflective practitioners to recognise ethical dilemmas and conflict in the moment and exhibit more confidence, not to be confused with over confidence, about their own values and how to incorporate them into their own ethical practice. Ethical practitioners also need to be able to question their own values through RP. In this way, knowledge, values, and skills are integrated. Not only is practice reflected upon, but learning is obtained from reflection. What is noteworthy, according to Banks (2006), is that from all the aforementioned capabilities, reflective practitioners “*are prepared to take risks and moral blame*” (p. 140). This is most likely due to RP and accountability preventing

SCWs becoming defensive practitioners. Defensive practitioners are described by Banks (2006) as those who practice within the confines of law and agency policies to fulfil their duties, ensuring blame cannot be assigned to them. This is synonymous with carrying out duties that meet the obligations to the agency, rather than taking the “*right action; personal and agency values tend to be separated, and the latter adopted*” (p. 140). This way of working will not always be in the best interest of the individual worked with and this is where RP succeeds in recognising the gap between agency/legal frameworks and the needs and wishes of the individual worked with. Professional/clinical supervision has a role to play here and will be discussed further in Chapter four, section 4.3.3).

Bolton (2010) informs us, “*All action is founded upon personal ethical values. We are what we do, rather than what we say we are*” (p.4). It is of major benefit to the individuals worked with when SCLs/SCWs themselves, too, have engaged in exploring their personal ethical values prior to entering into practice. Otherwise, the SCW may be oblivious to whether their personal ethical values align with that of the SCW profession or organisation. Personal ethical values may well be influenced by many experiences and contexts, both past and present.

Jarvis (1992) and Mackintosh (1998) are hesitant to agree that reflection provides all it suggests it does, due to insufficient research evidencing the benefits of RP (Atkins and Murphy, 1993; Mackintosh, 1998). Boud, Keogh and Walker (1985) consider it possible to overlook the familiar, engage in selectively remembering the event or experience and make assumptions that RP is occurring effectively and for all group members. Reflecting within a supervisory space can further develop the supervisee’s interpersonal skills and the ability to understand people (Gardner, 1993), hence avoiding selectively remembering. McCann (2000, p. 43) views supervision as encompassing a reflective learning process, rather than a process for direction and audit, which represents a “*significant difference between teaching techniques as opposed to teaching a way of thinking*” which may also augment remembering. It also is, or at least should be, a safe space where support is sought and RP facilitated. It would seem that if SCWs are willing to invest time and energy, often in short supply, to engage in RP, then I posit they are eager for the knowledge that can be gleaned from RP. Bunston (1997, p. 64) emphasises the importance of self-reflection and RP in protective services and recommended that distinguishing the emotions emanating

from the individual worked with (transference and countertransference) from those which belong to the worker “*may significantly counter the burden of despair*” often experienced by SCWs. Not engaging with self-reflection and RP can lead to burnout and lack of self-care. Burnout prevents the SCW from practicing at an optimal level, perhaps a contributing factor in the many atrocities and abuses inflicted upon individuals, both historically and today. Burnout (discussed further in sections 3.6.8 and 3.6.9) could be viewed as an occupational hazard, occurring in SCWs and other professionals working with vulnerable individuals. It causes physical and psychological distress which when recognised may lead to competent workers leaving the profession. Conversely, the danger lies with those who do not engage in RP or recognise they are burning out, often resulting in suboptimal service delivery (Wessells, 2013). According to Stoesen (2008), stress and burnout are generally experienced by workers providing direct, one to one, services to individuals, especially those in mental health and health care professions. Additionally, organisational factors, issues such as overwhelming caseloads, long hours/shifts, and insufficient resources also play a role in burnout. Bride (2007) notes listening and attending to individuals’ traumas can produce signs of burnout, in addition to both secondary traumatic stress which can be experienced suddenly and vicarious traumatisation which accumulates over time. Thus illustrating the necessity for RP learning and practice for our SCLs and SCWs. Thinking reflectively involves looking back at the shift just completed, how emotionally or otherwise the SCL/SCW was affected and how new approaches could be developed (Hammick, Freeth, Copperman and Goodsman, 2009). Atkins and Murphy (1993) recognise that an essential prerequisite to reflection is self-awareness as an ability to be conscious of our values and capable of analysing our impact on a situation. We must also know why we are reflecting, otherwise it is less likely to be effective. A SCW affected by experiences or encounters during their shift can reflect on these and learn from them and implement new learning as a result (Corey, 2009; Kolb, 1984).

If practiced correctly, RP could provide a robust epistemology for practice, something Schön (1990; 2005) seeks. This epistemology for practice would be beneficial in providing EBP/EIP (Howlett, Rogo and Shelton, 2021; Mantzoukas, 2009). RP is a way of working, where contexts for practice are uncertain and complex, and where there is a desire to continually improve and to adapt to changing internal and external practice contexts. However, it is possible that without the correct training, RP can and

has been a negative experience for some SCWs. A negative experience in that they may focus only on the negatives from the event or experience. RP is not solely concerned with learning from our mistakes, it also focusses on identifying what works well, our strengths, and how we employ them and make the most of them in the various situations encountered (Healey and Spencer, 2008). Johns (2000a) approaches to RP are implemented extensively in health and SCW. He advocates ten principles, which underpin effective reflection. These ten principles provide detailed guidance on how and what to reflect on and could be an ideal place to start RP, before moving onto the more advanced frameworks of Gibbs or Kolb, and before then incorporating Schön's (1983) framework of RP. With more experience, Rolfe et al., (2001) or Johns (2006) frameworks of RP could be most beneficial as they could be challenging for the novice reflector due to their more theoretical nature. Of course, this is dependent on the reflector's requirements; an eclecticism (mix and match) approach from the aforementioned models could be incorporated into the SCWs RP, appropriate to the situation under reflection. Numerous reframing and debates around RP models exist referring to the contested terms of reflection, critical reflection, reflective practice, reflexivity, and praxis. As Fook, Collington and Ross (2015), Coburn and Gormally (2017) and Gardner (2014) rightly agree, introspective and transformative attitudes towards, and the process of, uncovering, examining, and altering central assumptions are common threads among those contested terms. Hence, the aforementioned frameworks, particularly Kolb (1984), Gibbs (1988), Schön (2005) and Johns (2006) facilitate the difficult process of RP in every aspect of practice, the negatives and the positives and everything in between can be reflected upon. RP can occur individually or in relationship with others. Relationships, the focus of this next and final subsection, are at the heart of SCW practice, both theoretically and through various interventions.

Relationship based interventions

The success of many interventions are based on the relationship between SCW and the individual(s) they work with; success reliant upon the relationship rather than the approach adopted (Ellis, Simiola, Brown, Courtois and Cook, 2018; Norcross and Lambert, 2018; Turney, Ruch and Ward, 2018). As Garfat (2012, p. 13) explains, this is "*being in relationship*" with other/others and signals a more central focus on the self of the SCW and is situated phenomenologically on how they co-create and experience

the relationship. Additionally, this co-creation of relationship is in the context of acknowledging an individual's agency, autonomy, rights, and experiences. The creator of the relationship recognises the importance of boundaries and triggers, in addition to grasping the various social aspects out of which the relationship was created, such as the cultural, political and historical experiences of the individual worked with. Working in this manner within the co-created relationship can open up the individual to other ways of experiencing daily living moments. SCWs engaging individuals in relationship-based interventions must be cognisant of the impact, often unconsciously, of past experience on the individuals' present thinking and behaviours. Possessing these unconscious and conscious effects are at the heart of what makes us human but are also incredibly complicated. Not only are SCWs in this co-created relationship working with the presenting issues, they are also working with the complexities of the inner world of the individual, often a world unfamiliar even to the individual worked with. Habitually, from experience, and in agreement with Hicks, Gibbs, Weatherly and Byford (2009), the relationship itself is the intervention or at the very least the medium in which an intervention can proceed. These person-centred humanistic approaches can be comparable to psychodynamic approaches, valuing the insights residing in the unconscious and relying on non-directive, optimistic outlooks focusing on the individuals' worked with ability to bring about positive changes in their own lives and that these individuals strive for self-actualisation.

With many health and SCW organisations employing a business model for care based practices, relationship based interventions are viewed as unappealing; the volume of individuals worked with is prioritised over relationship based practices. This type of neo-liberal practice can undoubtedly lead to a quick fix or perhaps a short term fix, but this is not the ethos of SCW, as often what the individual has been referred for is usually only partly related to the issues experienced, something that Pyles and Adam (2016) and Megele (2015) can attest to. Steckley (2020) affirms the essential nature of relationships, particularly the relationship between SCW and child. Moreover, she claims, in some contexts, how to develop and enact these relationships is often lacking or non-existent. Froggett, Ramvi and Davies (2015) have called for the use of self to *"become an object of research as well as clinical inquiry"* (p. 135).

Rogers (1961) acknowledges therapeutic relationships develop when the chosen approach is non-directive and non-judgemental. Moreover, this approach must include

active listening, empathetic understanding, and should be genuine/congruent and display unconditional positive regard/acceptance. This includes developing, where and when possible, a therapeutic relationship with individuals worked with, whether they are SCLs or individuals encountered in SCW practice. However, it would be remiss not to also keep in mind other developmental, psychodynamic, or behavioural theories and perspectives. Listening and caring may not be enough. Yet, without the embedding of listening and caring aspects, which are components of the therapeutic relationship/alliance, other perspectives are unlikely to be as successful without first forming that therapeutic relationship. It was Brendtro and Ness (1983) who found “*The quality of human relationships is the most powerful determinant of successful programmes for the education and treatment of troubled children*” (p. 17). The qualities and skills of relationship-building possessed by SCWs have been deemed fundamental in engaging with young people in care (McKellar and Kendrick, 2013; Mason, 2012). The evidence highlights the influential role of a child’s secure base on all other domains of their development, including education, friendships, and social competencies (Bowlby, 1969; Bell and Romano, 2017).

Zegers, Schuengel, van IJzendoorn and Janssens (2006) research with young people in a secure setting suggests well-adjusted young people generally adopted the relationship with their SCW as their secure base, leading to more moments of contact with their SCW rather than avoiding interacting with their SCW. Furthermore, a SCW needs to be acutely aware of the impact they are having in any given scenario. Therefore, SCWs self-awareness is central to this process of communicating. Rogers (1961) person centred approach concludes that individuals are, for the most part, trustworthy, yet most noteworthy is his belief in the capacity for individual’s to both understand themselves and resolve any arising issues. Most significant is his belief in the individual’s capacity for self-directed development when engaged within a therapeutic relationship. Theory and techniques/interventions, as far as Rogers (1961) is concerned, are secondary to the quality of the therapeutic relationship and the characteristics of the instigator of the therapeutic relationship. Rogers (1961) also advocated for non-directive and permissive approaches to the work, with the main aim being to reflect back the individuals’ verbal and nonverbal communications. Hence, the requirement that SCLs/SCWs be adept at interpreting and being fluent in communication techniques, as both verbal and non-verbal communication is crucial to effective practice. All the above-mentioned must occur within professional boundaries.

Professional boundaries are defined by Cooper (2012) as “a set of guidelines, expectations and rules which set the ethical and technical standards in the social care environment” (p. 11). A more simplified definition of professional boundaries, is provided by Westwood (2019) as,

[The] norms that protect, ground and guide the helping relationship. They mark a social, psychological space around the individual worked with that is protected from inappropriate intrusion by the social worker (p. 67).

It is a balancing act, particularly for new graduates, to define where the line of being emotionally attuned and available and unprofessionalism exist. Finding and negotiating this line can prove to be an emotionally draining aspect of the work. This is in part due to the sometimes squirminess of practice boundaries such as what behaviours are acceptable and non-acceptable and, under what circumstances is self-disclosure appropriate and for what purpose. Yet again, self-awareness and RP, whilst often inextricable, can provide answers. In addition to this balancing act, another layer to communication is conveying empathy to the individual. Elliott, Bohart, Watson and Murphy (2018) explain how empathy contributes to the therapeutic relationship, acknowledging empathy is about understanding and responding to the issues of the other individual in the relationship. Rogers (1951) argued that the element of communicating empathy and unconditional positive regard create an element of the working foundation of the relationship. Moreover, it is communicating dignity and respect to the individual that lays the foundation upon which the therapeutic relationship is built whilst also minimising power imbalances. From the material presented in section 2.3.3 we can conclude that regular RP could ensure self-awareness around the nuances of the interactions and ensure best practices are adhered to. Many authors have highlighted the more a practitioner knows and understands their own self, equates to their ability to enter the world of others through empathy, as they are less defended and open to visualising what it must feel like to be in the other person's situation. The more self-aware SCWs become, the more they can understand various behaviours, including their own, as well as their own strengths and limits. This level of self-awareness increases the ability to withhold judgement through honing active listening skills, being comfortable with silence and conveying empathy with verbal and non-verbal communication. Furthermore, the SCW can focus on the self of the individual if they are not trying to simultaneously focus on their own

self. They will also be quicker in recognising and working with defensive actions and communications.

According to Glumbikova (2020), other undesired ways of working involve the 'self' of a technician professional who generally maintains "*an objective approach to clients and neutrality; separation of the personal from the professional aspect of the self; and the application of predefined procedures and rules*" (p. 143). For the benefit of SCWs and the individuals worked with, legislation and policies in Ireland must ensure this mode of practising is avoided. In observing the tools employed in the practise and the self of a technician professional, priority is apportioned to "*depersonalisation, self-control, and fixed and impermeable boundaries*"(p. 143). As Menzies Lyth (1997) quite rightly acknowledged, getting caught up in rules, control, policies and disciplining negates the requirement to examine self in any great detail. Ward (2008) and Ruch, Winter, Cree, Hallett, Morrison and Hadfield (2017) advocate that practitioner education demands to exceed solely pedagogical methods. Moreover, it must extend to developing processes, as mentioned above, required in practice. These processes include the learners' felt experiences and authentic educator/learner relationships. In other words, the self of the educator has a role in modelling how the learner should operate in practice. As mentioned previously, the humanistic philosophy upon which person centred approaches reside allows for a PD and SCW climate where the expression of attitudes and behaviours are encouraged. Thus assisting individuals with developing their capacities for constructive changes and exchanges whereby individuals are empowered to achieve personal and social transformations. These transformations can be replicated with the individuals worked with. PD educators, SCLs and SCWs should firstly, bring their self to the relationship. It is advantageous to the individuals worked with if the PD educator, SCL/SCW are aware, and have knowledge, of their self which negates the possibility of the PD educator or SCW self unknowingly merging with the self of the individuals worked with.

2.4 Summary

To provide the context for this research this chapter examined the term and profession SCW. This is accomplished through the two major sections of this chapter, with each section containing a number of subsections. The first section concentrates on SCW, its history and present day developments (with further detail provided in Appendices F and G) and the barriers to the emergence of professionalism. The second section

focusses on the practice and practise of SCW and considers the wellbeing and safety for individuals availing of a SCW service. The second section also explores some of the key theoretical concepts in particular, the relationship between SCWs and theory. Some of the broader theory and practices of SCW are also explored in this section, namely, attachment theory, ACEs and TIC, RP and relationship based interventions. The contextualising and operationalising of SCW and selected theories relevant to SCW and its practice are reviewed as a backdrop to PD and PEP. In order to understand if the PD module from LIT SCW HE programme is relevant and beneficial for SCLs, SCWs and their PEs, it is deemed necessary to provide the background to SCW and its practice first. PD and PEP will be reviewed in chapters 3 and chapter 4 respectively. The next chapter will focus on the PD modules and reviewing literature pertinent to PD.

Chapter Three: Personal Development

3.1 Introduction

SCW, the profession and practise, its history and its future were considered in the previous chapter. A brief reminder of the research question: “Is the PD module from LIT SCW HE programme relevant and beneficial for SCLs, SCWs and their PEs?” In order to answer the research question, it is necessary to examine PD in its wider context and then consider how this examination is related to LIT PD module.

PD for the purpose of this research is a separate entity to professional development. And while there is a blurring of the boundaries as far as professional and personal development are concerned, some authors consider professional development to be predominately PD (for example, see the UK’s 1997 Deering report and studies such as Clegg and Bradley (2006) and Kirkwood (2019). There can exist an uneasiness and tension around the term and notion of PD amongst academics with a preference for professional development which often appears to be more tangible than PD. Perhaps this equates to the lack of research in this area, in addition to the desire to quantify “development”, statistically or numerically. For the purpose of this research, development pertains, qualitatively, to self-identified changes to SCLs and SCWs awareness of themselves, in noticing their impact on others and vice versa. However, the PD process is much more than this. It is subject to all these forces of influences and resistance and passivity, which will become apparent as this chapter progresses. Various definitions of PD exist most likely due to an inability to discern exactly what it is and therefore its assimilation into professional development and practice. A new definition of personal development, informed by the literature, specifically for social care work is presented later in the chapter.

Only a cursory glance will be given to the various theoretical concepts of the self, as the primary focus for this research is on the development of the self for SCW practice and practise. For the purpose of my role as PD facilitator, and in keeping with the psychodynamic and humanistic theories practiced, the version of self that learners bring to their PDG is unique to them, as is the process of the awareness and other personal insights gained as a result of their participation in PD. This view has

similarities to Johns research (1996, p. 7), which understands the necessity to approach the “self” in PD with the “*openness and flexibility*” that it deserves. Those who have extensively written on the topic of self in education include Seery (2010), with Trevithick (2017), Johns (2012), Lyons (2013) and Garfat, McElwee, and Charles (2005) concerned with the psychosocial aspects of self which is more aligned with my training, practise and thinking.

This chapter will tease out the most appropriate definition for PD related to the module under conceptualisation, followed by operationalisation of PD, then outlining the curriculum and assessment strategy for PD. Subsequent areas under review will include PDGs, effective PD facilitation and group dynamics, and finally some of the characteristics of PD.

3.2 PD Conceptualised

PD is a fundamental component of the B.A in SCW at LIT (LIT, 2014). PD has been at the heart of education since the time of Greek and Roman philosophers. Sadly, providing a definition of PD, applicable to SCW training has not. What follows is an array of PD definitions from perspectives other than SCW. This is due to a dearth of published studies referring to PD in SCW programmes. As such, terms such as “reflective practice”, “experiential learning”, “reflecting on feelings”, “getting in touch with oneself”, “openness to change”, and “personal growth” seem to co-exist with the term PD. PD encompasses those terms and more, namely, holism, self-awareness, self-actualisation, as will materialise as this chapter progresses, along with other terms. PD is a slippery concept which in turn renders writing about it a non-linear activity, as many of the characteristics are interweaved with other characteristics which can appear messy at times; which, in itself, is synonymous with both the PD process and SCW practise.

PD is often ill defined, unregulated and uneven in terms of standards of facilitating PDGs (Williams and Irving, 1996; Hall, E., Hall, C., Harris, Hay, Biddulph and Duffy, 1999). This is not a criticism, as the very nature of PD requires latitude and scope to deviate from the lesson plan, particularly if PD is to meet the needs of PDG members. PD, whilst still being defined, and for the purpose of this research, is not the provision of therapy. However, PD aligns more with therapeutic and contemplative education, psychological and psychodynamic theories, humanistic, person centred and

psychotherapy theories, with some crossover into psychoanalytical theories. Expansion on these theories will follow later.

Jung's (1961) theory on personality includes "*part of the nature of humans is to be constantly developing, growing and moving towards a balanced and complete level of development*" (cited in Corey, 2009, p. 79). PD, according to Rose (2018), relies on the capability to reflect upon or purposefully consider our "*attitudes, emotions, behaviours and thoughts*" (p. 20). Emotions, defined by Pettinelli (2019), "*are unconscious feelings that are the result of most unconscious thoughts*" (p. 24). It is the behaviours behind these feelings and emotions that provide facilitators and learners with possible insights into the unconscious. Jung (1961) augments this view when he explains psychotherapy, similar to PD, is a mixture of what and who we have been and what we will aspire to be within the future (cited in Corey, 2009, p. 149).

Hughes and Youngson (2009) define PD, within the context of clinical psychology, "*as the development of self-awareness and the effect of the person's history and training on their professional development*" (p. 183). This definition alludes to the individualistic nature of PD. We all have a unique history and developmental trajectory. Thus, I suggest PD can be viewed as developing and discovering self in partnership with fellow learners for the benefit of current and future self and individuals encountered in practice. Ieva, Ohrt, Swank and Young (2009) understand that experiential groups similar to the PDG have been delivered within a small number of Master's degree programmes, thus it would seem research that determines potential therapeutic benefits of PDGs to its members is lacking (Eskridge et al., 2013).

Irving and Williams (1999) outline the differences between PD and personal growth. To them, PD is a "*process concerned with specific aspects of the individual: the development of 'what, and the way this can be planned, achieved and evaluated'*" and personal growth is "*a more generic process having to do with the totality of the individual*" (p.517). Therefore, personal growth could be argued as an outcome of PD, motivated by self-awareness and understanding, while "*development can be planned; growth cannot*"; instead, "*Growth is what may happen as a result of personal efforts to develop*" (p. 518). In other words, as a result of engaging with PD, one could expect to experience personal growth. Clegg and Bradley (2006) believe PDGs advance awareness and character, and solidifies capacities and skill for individual group members. PDG is predominately the focus of this research and to consider if PD can

offer all Clegg and Bradley (2006) believe it to offer. Cottrell (2003) studied the attitudes of learners in relation to the PD process and found that learners may not always find PD to be beneficial and may avoid actively engaging in the PD process. Similarly, Lucas, Cox, Croudace and Milford (2004) found learners can struggle to separate transferable skills from personal traits or qualities. Dryden and Feltham (1995) appeal for purposeful PD programmes to be provided in training programmes.

Rogers (2012), the father of humanistic theories, recognises the process of PD as a crucial requirement of an individual's psychological development. Rogers (2012) notes that, "*a person learns significantly on those things which he perceives as being involved in the maintenance of, or enhancement of the structure of self*" (p. 389). That is to say, people will only learn if they feel it is of benefit to them in some way. This is relevant to the following research sub question "How do participants and respondents articulate the content of their learning and their experience of PD as a pedagogical and practice process?" Hunter, Bailey and Taylor (1996) recommend all teaching should be focused on PD, as opposed to developing specific competencies. This contradicts a number of authors who suggest serious competency and adaptation issues relating to training group members in the intricacies of knowledge conversion, exist across professions, without any pedagogical techniques in existence to effectually impart acquisition and application of knowledge and skills in curriculum, PEP, or practice settings (Wheeler, 2000; Kivlighan and Tibbits, 2012; Macgowan, 2012; Knight, 2014; Sweifach, 2014).

According to Markus and Abernethy (2001), hesitancy to engage in PDGs can be traced to group members' underlying anxieties around participating in group and risking emotional/affective dysregulation. Rogers (2012) also notes that PD is about growth, which encompasses change within one self, and yet, with this growth and change people can feel exposed or vulnerable and resist this process. When there is a perceived threat to the self or the individual feels exposed and vulnerable, this may lead to them becoming blocked from participating. Daloz (1986) is in agreement with Rogers (2012) and Markus and Abernethy (2001) in recognising that growth can be risky, as learners are facilitated to release their hold on old conceptualisations of self and the world. Furthermore, as Nadan and Stark (2017) recognise, learning activities that uncover unwanted or disturbing thoughts and emotions may be rejected or attempts made to discredit them. As agreed by Nadan and Stark (2017) and Rajan-

Rankin (2014), it is difficult for those who believe they do not need to focus on their own experiences or woundedness to attend to the individuals worked with, which in turn may be in total contrast to their truthful disclosures and attributed emotions and imperfections. This incongruence can evoke the same reactions outlined by Nadan and Stark (2017) when unwanted or disturbing thoughts and emotions are uncovered.

Although some of the above studies suggest that PD may not benefit all learners, a study from Slight and Bloxham (2005) accentuated some improvements were apparent from taking part in PD, namely the employability of the learner in their last year of college. Furthermore, this research emphasised the PD module as being beneficial to the learner when making informed choices about their elective modules and also when seeking practice education placement (PEP). Reasoning and creative thought with the development of knowledge for intellectual and professional growth were just some of the skills highlighted in Slight and Bloxham's (2005) PD framework. Similar to the previously mentioned Deering report, many academics and authors favour keeping PD boxed into an intellectual and professional endeavour. It would seem whilst PD accentuates intellectual and professional endeavours, it is more than that, as the remainder of the chapter will attest to.

Having studied the PD module for four years, it is expected learners will have gained the skills to continue with what I, and McLeod and McLeod (2014, p. 9), understand PD to comprise of, namely:

an enduring, career long commitment to engage in cycles of collaborative reflection on both life experience and practice, leading to new ways of understanding and active experimentation of new ways of being with others, for the purpose of being able to be as useful as possible to the service users with whom one works.

Definitions quoted above closely represent my understanding of PD as I, SCLs, and graduates most likely experience the PD module content and experience. The above definition holds relevance to the following element of the research sub question; "How is PD conceptualised ? I define PD as a purposeful commitment to form a more truthful relationship with self and others whilst attempting to courageously overcome the fears and struggles associated with that commitment in order to bring the best version of self to personal and practice life. Consequently, "*Unless we learn to sit with fear, we shut the door to recovery, change and growth*" (Sieff, 2015, p. 39). It is possible a deeper PD is achievable when trust is placed in a trustworthy facilitator to hold and

guide individuals on their PD journey, at the individuals pace. Also, when there is deep trust among group members it is possible PD can be further enhanced. Taking that a step further, when even one group member concretely displays an act of courage in the group by opening up, it is often the catalyst that others require to take that leap and trust that the group is ready to support them in a non-judgemental manner. Allen and Tracy (2008) maintain that learners in the Health and Social Care fields must learn to identify their strengths and limits through PD, while incorporating flexibility to engage with the individuals they work with.

Following Spencer's (2006) research with a cohort of 60 Diploma in Counselling learners, she continues to seek clarity and answers to the following:

we may still need to address a lack of clarity in relation to personal development training. What do we really mean by it? How we can help all students achieve it? How can we assess students' personal development? How do we really know when students are not engaging in personal development work? Can we as a profession afford to devote so much training time to activities which we either don't assess, or don't know how to assess, and for which we have little research evidence of its effective contribution to counsellor development? This is a plea for further debate and research (p. 113).

Spencer's (2006) plea is answered incrementally throughout this research by providing definitions of PD and with a review of the most pertinent PD studies and later the PD curriculum and assessment process in sections 3.4. Next is a review of pertinent PD studies.

3.3 PD Studies

The studies reviewed in this section include PDG work in professions other than SCW, since studies relating to PD and SCW are, to date, non-existent. Currently, the research of LaRocque (2017), Kivlighan III et al., (2019), Choi and Protivnak (2016), Ohrt, Prochenko, Stulmaker, Huffman, Fernando and Swan (2014), Yalom (2015), Jordan (2010), Payne (2001), Kiweewa, Gilbride, Luke and Seward (2013) and Moller and Rance (2013) are the most applicable to LIT SCW PD module. Two other relevant Irish studies are Green's (2017) study and the McMahon and Rodillas' (2020) study. Green (2017) examined non-PD trained SCWs understanding of self-awareness and reflection, the impact of reflection on their practice, and the factors which support and/or impede reflection in their practice. The McMahon and Rodillas' (2020) longitudinal study reports on the experiences and expectations of 32 Irish integrative

psychotherapy students during an academic year's attendance at a PDG. The purpose of reviewing these studies is to examine if they can shed some light on two of the three sub questions posed in this research. Those sub questions are:

- How do participants and respondents articulate the content of their learning and their experience of PD as a pedagogical and practice process?
- What role, relevance and benefit, if any, does PD have in SCW education, PEP and SCW practice?

And whilst the majority of the studies focus on professions other than SCW, PD is the common denominator in all the studies.

LaRocque (2017) examined growing concerns in the literature that traditional group work education in social work was not providing the foundational knowledge, skills, EBP, professional uses of self, or adherence to practice standards necessary for effective group practice. LaRocque (2017) quotes a number of authors who suggest empirical support examining the transfer of PD to practice is lacking. It is imperative empirical support is initiated to examine the effectiveness or ease of PD applicability in practice settings (Kivlighan and Tibbits, 2012; Sweifach, 2014). An element of sub-question three addresses whether PD has a role in SCW practice. LaRocque (2017) goes on to express that despite the literature reinforcing the case for experiential groups as a fundamental educational tool for facilitating the learning pertinent to the professional use of self in groups, they are the exception in social work training. LaRocque (2017, p.19) similar to other authors also laments the limited research devoted to this element of group training, with limited consensus on "*how to provide interpersonal learning in education...*" (Ieva et al., 2009; Kivlighan and Tibbits, 2012; Lau, Ogrodniczuk, Joyce and Sochting 2010). That being said, LaRocque (2017) noted the encouraging outcomes related to group processes and learning that have been found in the limited studies conducted, namely by Ieva et al., (2009) and Stempler (1993). In addition, Caplan and Thomas (2002) are also credited with providing empirical evidence acknowledging how experiential group learning ensures improved use of self and generic practice skills, including active listening, interpersonal compassion and warmth, exemplary communication and support including intensive targeted feedback. Some of these skills will be addressed later in this chapter. In opposition, MacGowan (2012) views much of the literature on group training, in particular, the development of professional uses of self, as descriptive or based on

learning outcomes (LOs). In addition, while PD has to meet LOs, and does, it is not my sole focus whilst facilitating PD, as meeting the broad LOs occurs organically and within lectures. The development of professional uses of self, in my view, is far from descriptive; indeed, it is at the very heart of why PD learning exists for SCLs. It goes beyond descriptive into critical reflection and analysis (Fook, 2010).

Kivlighan III et al., (2019) found much of the literature on PD/experiential groups concludes that, despite insight into these groups' outcomes, there is a requirement for research to examine processes of these groups connected to attaining development as a learner. They also endorse the work of group theorists in defining group cohesion as containing two main elements, as defined by Burlingame, McClendon and Alonso (2011); relationship structure (vertical relates to group members perception of leaders' relationship qualities and horizontal refers to members' relationship to each other) and relationship quality (refers to group members sense of belonging and acceptance, as well as interpersonal work). This group cohesion shares similarities with groupthink theory developed by Janis (1972) and is applicable to experiential groups that exist within various helping programmes. For instance, Shumaker, Ortiz and Brenninkmeyer (2011) report that approximately 90% of counselling programmes implement an experiential group. The most frequently used model of experiential group training was an experiential group led by the course instructor. Counselling learners who participated in multicultural groups increased their cultural awareness (Bieschke, Gehlert, Wilson, Matthews and Wade, 2003; Conyne, 1998), knowledge (Estrada, Durlak and Juarez, 2002), sensitivity (Conyne, 1998), and multicultural specific group skills (D'Andrea, Daniels and Heck, 1991). Rowell and Benshoff (2008) assert that counselling learners who participated in PDGs in a multicultural counselling course experienced significant increase in ethnic identity development, whereas those learners who did not participate in these groups did not show as much growth in their ethnic identity.

Ohrt et al., (2014) explored the characteristics of 52 counselling trainee group members' development throughout the group experience from a group leadership perspective. They concluded members gained insight into their own personal self-awareness and their strengths and limits. Furthermore, they stressed their participants' ability to lead groups was related to the development of improved empathic skills. Participants who participated in a PDG experienced significant increases in their

beliefs in their competence and ability to set personal goals and experienced “*therapeutic factors*” which could be further enhanced by providing group for more than one semester (p. 111). Cohesion and the necessity of creating a safe and trusting environment, whereby, group members’ feel a connectedness and openness to other group members was also outlined. A safe and comfort inducing environment and collective high levels of engagement by all group members, coupled with beneficial feedback and exchanges, may entice members to contribute on a deeper level, providing the opportunity for meaningful connections with the potential to experience feelings of universality. However, Ohrt et al., (2014) maintain that oppressive systems affect group members’ functioning in many ways and they advise not to neglect providing the cognitive knowledge aspect of the programme. Based on the evidence in the literature analysed above, there is a strong case for the inclusion of cognitive knowledge which occurs during PD lecture as part of the SCW programme.

Yalom (2015, p. 210) identifies a gap in addressing the therapeutic relationship in counsellor training. Though research on effective psychotherapy continually shows that the most important factor in determining outcome is the therapeutic relationship; however, the texture, the creation, and the evolution of this relationship are rarely a focus of training in HEI programmes. As Perry and Szalavitz (2006) concur, “*the most therapeutic experiences do not take place in “therapy” but in naturally occurring healthy relationships... what works best is anything that increases the quality and number of relationships*” (p. 80). This is as much true for SCW practice as it is for teaching practices and as a PD facilitator, this is kept in mind at all times. Although this is comparable to the style of PDG facilitation being proposed in this thesis, it is easy to forget to develop therapeutic relationships in an academic setting, particularly one where PD is viewed as an academic endeavour which generally does not require a therapeutic relationships for the transfer or generation of knowledge. However, PD differs from most other modules since the required learning is of a deeply personal nature. In agreement with Woolfe (1992), facilitators must be adequately self-aware in order to have the capacity to disentangle their own needs from those of the learners and be authentic with them and undefended. PD facilitation should not expect group members to address anything the facilitator is unwilling to address. It requires that facilitators have engaged in their own therapeutic work, recognising the group members’ struggles and empathising with them and accepting the thoughts and feelings of group members without judgement, thus re-enforcing their efforts.

PDG epitomises the work of Ward (1999, 2008) when he describes “*the matching principle*”. The matching principle is defined as “*the proposal that in training for professional practice the mode of training should match the mode of practice*” (Ward, 2008, p. 189). Authentic PDG interactions can only occur with openness, mutual respect and the emotional availability of the facilitator of the relationship, with an expectation that it will be rewarding for and reciprocated in part or in full by the other individual or individuals involved. It is important to examine and adjust patterns of both connection and disconnection for all parties within the relationship (Jordan, 2010). Disconnection, in terms of PD facilitation, is often overlooked or viewed as the PDG member who is not interested in examining issues but within disconnection can reside emotional or psychological distress as a result of not experiencing interactions as empathic or empowering. It is possible their interactions aroused feelings of shame or being silenced during the interactions. Perhaps the interactions did not feel authentic, leaving the individual feeling disconnected (Rogers, 1957). This may be more important than Spencer’s (2006) focus on quieter members/members not contributing to PDG. Moreover, there can be a rupture in this relationship when emotional disconnections between the facilitator and learner(s) can produce a negative change in the quality of the interaction, likely resulting in blatant power struggles, relationship dynamics or take over the learning environment, leaving other learners feeling unsafe (Robson and Robson, 2008; Brown and Atkins 1988). Ginot (2015) suspects these dynamics or “*enactments are understood as powerful manifestations of the intersubjective process and as inevitable expressions of complex, though largely unconscious, self-states and relational patterns*” (p. 317). An emotionally attuned facilitator will find a way to address those feelings of disconnectedness with the group member(s) or perhaps address in a generic way within group, in a manner that does not add to the disconnected feelings of the individual(s). Furthermore, when responding to these changes, the facilitator, must be aware in the moment, of their own subjective and intersubjective experiences, only then can emotions be regulated and processed and a sense of safety restored for PDG members (Gloster-Smith and Rose, 2004; Cozolino and Sprokay, 2006; Richards et al., 2010; Schore, 2014; Stella, 2016). Jordan and Dooley (2000) have also written extensively on the topics reviewed in the previous three paragraphs.

Payne (2001) undertook research examining learners’ experiences of PDG work, particularly the question of safety. The findings demonstrated learners’ feelings of

safety in PDGs was dependent on other group members being present and displaying a caring attitude towards PDG members. This correlates with twelve factors identified by Kiweewa et al., (2013, p.76) as leading to PD in PDGs. Their analysis of 27 counselling trainees weekly journals identified the following as the most relevant to PD: vicarious modelling (learning from others' risk-taking), genuineness/authenticity (honestly expressing own feelings, thoughts and reactions), self-disclosure (of personal information), validation/acceptance (from others) and also from the facilitator's interventions/guidance. Two other relevant factors, regular attendance and active participation were also reported as influencing PD.

Another 2013, small scale, study by Moller and Rance sought the perceptions of 25 PDG members enrolled on a counselling programme through anonymous open-ended survey questions. Some participants had experience of previous PDGs and other participants were unfamiliar with PDGs. Interestingly, Rance had four years personal experience as a PDG member which was experienced as *"frequently uncomfortable and occasionally painful"* (p. 287). Overall, she found PD *"to be an enlightening process which enabled her to discover more about herself and her own role in groups"* (p. 287). Surprisingly, whilst we are told 13 participants engaged in a yearlong 90 minute PDG, it is unclear the duration of the other 12 participants engagement. Also, absent, is the age and qualification profiles of the participants. Their findings demonstrated three prominent themes, namely: good, bad, and uncertainty. A sense of uncertainty was experienced during PDGs when expectations of what was expected of group members were unclear or non-existent. Further uncertainty centred on the unpredictability of what will arise, how to respond to it, and how those responses will be perceived. Other uncertainties could be considered positive uncertainties, such as expectations that facilitators would appropriately, when warranted, provide support in the face of any challenges. The bad included *"the potential for the PDG to be a distressing experience"* (p. 292) with learners concerned that they might be misunderstood or negatively judged or feelings of rawness or unsafeness may surface should personal issues be *"touched on"* (p.292). Concerns were thought to pertain to inadequate support or understanding when discussing difficult issues which can feel like an unsafe space within which to reside. Confidentiality was another concern, in addition to *"being forced to say things"* (p.292). The good included the high value placed on PDGs for increased, self-acceptance, awareness of judging others, and functioning fully or as a *"whole"* person (p. 290). Noticing reactions to others and

utilising thoughts and feelings to recognise underlying issues was considered the positives of PDG. Unanticipated personal triggers and vulnerabilities could be revealed, and this was deemed essential for practice. Bearing witness to group members' various views on issues opens up possibilities to further understand the individuals worked with. Learning the impact one has on the group assists with considering and knowing the impact one has on the individuals worked with. Finally, the positives from PDG could augment learning within other aspects of their programme.

Moller and Rance (2013) note in their discussion, participants struggle with uncertainty regarding the "*purpose and process of*" PDGs (p. 297). Lindsay and Orton, (2014, p. 75) confirm, group members may be scared, uneasy or anxious at the beginning phase of their group, resulting in uncertainty of what will transpire or be expected of them. This can be mitigated somewhat with individual meetings/interviews prior to beginning the first PDG. Also each group formulates and signs a group contract (Hesterman, 2016). Other discussion points from Moller and Rance's (2013, p. 283) study were "*ethical issues*" applicable to facilitators, suggesting the importance of diminishing anxiety and eliminating barriers that contribute to effective engagement with PDGs. The participants from Moller and Rance's (2013) study were responding based on either one year group participation in PDG or previous experiences in PDG prior to the one under investigation. This raises the following question of, which good, bad, and uncertainties were attributable to those with and without previous PDG experiences? Since the survey was anonymous, it is impossible to know how the various ethnicities and genders responded. Moller and Rance (2013, p. 287) accept that alternative data collection methods to theirs, such as interviews, would most likely elicit "*more detailed and potentially richer participant responses*". Moreover, they are adamant the value of PDG should be empirically researched to examine the value of PD for proficiency in practice and better outcomes for the individuals worked with. This is most likely due to many of the authors mentioned in this section relied on group work learning to meet the practice requirement of running groups, whereas in addition to facilitating groupwork, PD delivered on LITs SCW programme is designed for, namely, equipping learners with the skills to be aware of and manage the self in any SCW practise situation and connect relationally, non-jugementally and empathically with individuals worked with. This present research adopted interviews and online diary methods and

also with a larger sample than the Moller and Rance (2013) study and will be elaborated upon in chapter five.

Both the LIT PDG and McMahon and Rodillas (2020) PDG require 80% attendance for PDGs. McMahon and Rodillas (2020) examined all 32 learners undertaking their four year, part-time Masters in Integrative Psychotherapy during one academic year. These PDGs differ from LITs PDGs in a number of ways. Firstly, LIT PDGs are part of the full-time SCW programme. Interestingly, in the McMahon and Rodillas (2020) study, their 1st and 2nd year learners have twice as many group hours as their 3rd and 4th year counterparts. Their study was predominately a quantitative study. Their most prominent theme suggests their participants experienced growth in awareness, personally and interpersonally. Self-awareness was gained through identifying with others' experiences, as well as through sharing and exploring their own experience. PDG group participation aided the uncovering of blind spots and areas of resistance. Relational awareness was also credited to participating in PDG, in particular, there is an appreciation of individual differences, as well as how relational dynamics could enable honest sharing. Development of empathic skills was also reported. Validation was gained through peer feedback regarding both their presence in PDG and their interpersonal skills. Learning from PDG, particularly from facilitator and peer models was also gained. Whilst most participants experienced feelings of vulnerability, guardedness and fear of exposure within their PDGs, many also reported benefits when they risked sharing their vulnerability, as well as growing feelings of safety, support and group cohesion over time (Brown, 2012). Refraining from participating in PDG was incorporated by participants as a self-protective mechanism and to avoid being judged by their peers. The majority of participants described experiencing benefits when they took risks to push through their discomfort. Some of these benefits included feeling more ease, safety and enjoyment over time. More frequent PDGs was suggested. The participants sought more facilitator input in terms of providing more challenge and feedback and those with facilitators who were more directive wished for a more organic process to unfold. Also, the purpose of the PDG required further explanation. Overall, McMahon and Rodillas (2020) state "*While statistically significant, there was just a small increase in the students' overall ratings of their interpersonal awareness and skills at the end of the year*" (p.176). It is not clear what year of the participants' study each of these findings refer to. One would expect different results if each year had been independently studied rather than en masse.

Green's (2017) Irish study is the final study to be reviewed in this section and is relevant to the current research as it provides a snapshot of SCW practice for SCWs without PD learning. Green (2017) examined 7 non-PD trained Irish SCWs understanding of self-awareness and reflection, the impact of reflection on their practice, and the factors which support and/or impede reflection in their practice. Participants had practice experiences ranging from three to twenty years. The participants worked in residential child care, disability services, and domestic violence services. Green (2017) found a limited evidence base in general on the use of RP in SCW practice. Her findings show that participants had a general understanding of self-awareness and how to reflect on practice. Interestingly, her findings imply that the role of self-awareness and reflection in SCW practice appears to be an ideological concept, which the participants believe to be an essential professional skill. However, these skills are rarely invoked in everyday practice. Green's (2017) participants report having little input from their educational programmes on the concepts of self-awareness and RP. Participants also recommend that more needs to be done about self-care in the education of SCWs. However, it is impossible to know if the participants received training on self-care as part of their education. It would seem unlikely, since self-awareness and RP are deemed essential to recognise when self-care is required. The majority of participants use supervision as a means to reflect, and despite participants linking effective supervision to developing self-awareness they are dissatisfied with the infrequent amount of supervision provided. Team reflections are deemed more task focused than reflective, and participants have little opportunity to identify factors that support them, as they report significant reflection is not engaged with. Thus, it is believed that, if reflective practice does not come from the manager, SCWs will not consider the importance of being self-aware and reflective. Participants also contend that training should be provided by their organisations in order to create a culture of RP. This training could become a part of the daily working routine. Surprisingly, participants do not recommend they receive this training as part of their education. When discussing what impeded reflection, the participants report their limited understanding of self-awareness and reflection. Green (2017) advocates for SCWs to be more assertive in promoting the importance of reflection within their organisations. Perhaps these participants lacked assertiveness learning which prevented them from highlighting their professional deficits and needs. This next section centres on the operationalisation of PD as part of LIT B.A in SCW, the focus of this research.

3.4 PD Operationalised

PDGs in LIT SCW module consist of a closed group of 10-12 learner members plus a lecturer/facilitator, with an 80% mandatory attendance for one hour per week group and two-hour lecture during the academic year over the four years of the programme. The overall aim of this module is to introduce learners to the process of engaging with and reflecting upon their personal growth and development, with the opportunity to explore both the personal and professional self. The learner is assisted to explore and apply theory from the lecture during PD experiential group work. This fits with Shulman (1987) and Weimer's (2003) view concerning the mirroring of the PD lecture in terms of phases of group development, and the necessity to simultaneously balance content and process within the PD lecture and group. In other words, the adaptation of particular learning activities from lecture should where possible coincide with appropriate stages of group development and encourage reflection about the group processes observed by learners during lecture.

PDG at LIT is a technology free space to encourage the group members to be present and available to each other through active listening. Berger (1996, p. 82) declares traditional teaching methods such as lectures, videos, and class discussions, as suggested by Urdang (1999a; 2010), culminate in teaching "about" group work, as opposed to the explicit experiential learning arising from participating in a group.

By engaging with new ideas and research findings to develop new practices and evaluate curriculum change, educational practitioners will be better placed to formalise and enhance personal and organisational reflective practice. Lui and Yin (2010) explored HEIs frameworks and models to assess PD/growth in learners. Whilst acknowledging that academic material is imperative, Lui and Yin (2010) consider interpersonal skills equally important for learners to develop because they recognise educators as having a duty to not consider their learners as "*empty computers*" enrolled solely to gain the latest cutting-edge knowledge (p. 111). Banta, Lund, Black and Oblander (1996) emphasise that most HEIs have a section of personal growth in their mission statements and therefore it is important to align the learners' level of understanding and awareness of this growth to their academic studies. This corresponds with the HEIs "The National Strategy for Higher Education to 2030" which classifies a number of high level objectives for the Irish higher education system. One of those high level objectives is "*Students will experience an education that is*

excellent, relevant and responsive to their personal development and growth as fully engaged citizens within society” (p. 27). (See Appendix H).

Often, as Lucas et al., (2004) highlight, there can be a gap between HEIs descriptions of skills development and the understanding of this by the learners. Personal and professional development are often strongly intertwined which should be reflected to learners while they are still learners (Urdang, 2010; Wilkins, 2006). Contrary to the literature reviewed thus far, Wilkins (1997) and Rønnestad and Skovholt (2013) believe PD and professional development cannot be cleanly separated and that each is indistinguishable from and dependent on the other with fluid boundaries. They then recommend PD and professional development be combined rather than split into two separate modules. PD and professional development seem to be combined in the majority of HEIs offering SCW programmes in Ireland. However, the difficulty with providing the two distinct modules as a single module is that the in depth work on self can be overlooked, with more focus placed on professional development rather than the more emotive work on the self. With PD, learners are not under any illusion this is time to work on the self for practice. Furthermore, learners are focusing on their own PD journey and, as a distinct module, the importance placed on it by educators is evident. Within, professional development learners learn what practising SCW entails and how to incorporate the learning from PD and other modules into their practise. LIT SCW educators have been successful in adequately separating PD and professional development into two distinct modules. Separating PD from professional development necessitates that PD educators/facilitators have attained specialist training to ensure group facilitators possess a specialised skill set conducive to meeting the needs of SCLs engaged in PD learning.

PD facilitation for operationalisation of PD

As PD facilitators, Azadegan and Kolfshoten (2014) also understand the importance of being aware and understanding the needs of PDG members. As Rose (2018) succinctly notes: *“Challenging our ingrained ways of thinking is always difficult and requires sustained effort”* (p. 6). However, participating in check-in autonomously can lead to or increase *“peer validation”* recognising they share similar struggles with other group members (Clemans, 2011, p. 122). This can be particularly helpful for quieter group members (Webne-Behrman, 2006; Corey et al., 2008; Benson, 2010). Conversely, if the scene is incorrectly set, feelings such as wariness and anxiety can

be exacerbated which will impact on the part of group where the main body of the group work and processes occur. Mezirow (1997) describes a transformative learning environment, which exactly mirrors the PD environment, as one in which learners have full information, are not coerced, have equal opportunity to participate, can critically reflect on assumptions held, are empathic, and are good listeners, with a willingness to seek common ground and synthesise conflicting points of view.

The ending phase, or closure of PDG, holds the same, or perhaps more, importance than the beginning or opening phase of PDG. Both Prendiville (2008) and Chirumbolo (2004) concede that closure or final endings for group members exists on a continuum; a high need for closure right up to a high need to avoid closure, either end of the continuum can be borne out of fear, anxiety, loss or sadness. Closure, as Yalom (1975) observes *“is more than the end”* (p.365). Closure completes the session/sessions, providing an organic and specific opportunity to review and evaluate the entire session/sessions (Birnbbaum and Cicchetti, 2005). For the above-mentioned reasons, closure must remain an unhurried experience, with the expectation that some content arising from the facilitation and ensuing discussions may, as Zastrow (2009) believes, elicit an emotional reaction from some group members. Acknowledgement of these reactions are paramount, as is time and permission for the PDG member/members to convey how they are feeling at that present moment. In agreement with Moss (2012), groupwork stages contribute *“useful concepts which provide insight into how groups often evolve and develop their own characteristics as they continue to meet”* (p. 144). Williamson-Ashe and Ericksen (2017) explored what learners report or perceive as valuable from PDG participation. During the spring semester, April 2015, an amended Value Team Survey (VTS) was administered to 20 postgraduate level learners. Overall, the participants found the small group process productive and rewarding, and it enhanced the learners’ decision making and problem-solving abilities. Learners self-reported that working in a group improved their achievement and that working with their peers was an important skill. As mentioned above, this is not the only value or advantage of PD (Ryan et al., 2013; Magen, and Mangiardi, 2005). LIT (2014) conducted a survey looking at SCW learners’ satisfaction with the SCW programme. PD and PEP were considered the most relevant and useful modules to the respondents. Some of the PD topics covered include self-awareness regarding one's internal processes and how they impact upon self and others, reflective journal writing, contemplative pedagogies, the effects of family relationships

and patterns, assertiveness, non- assertiveness, use of self when engaging with individuals worked with, loss and grief, life story and working with diversity in human sexuality.

Overall, the initial aim of PD is to introduce learners to the process of engaging with and reflecting upon their personal growth and development. Group work is recognised as an academic endeavour for the purpose of “*socialization and academic achievement*” (Williamson-Ashe and Ericksen, 2017, p. 44). Often times, PD is tolerated on the syllabus, and not always recognised as a tool in socialisation or academic achievement. As previously stated, PD is more than a tool in socialisation or academic achievement. Indeed, it provides the space for learners and group members to make sense of their self and the self of others. If facilitation is effective, PD could provide the knowledge and framework for continuous PD across the SCLs lifetime, personally and professionally.

Heydt and Sherman (2005, p. 25) understand that the self is the main way or means that a practitioner has to facilitate change. Whilst they are referring to practice, the very same is true for PD facilitators use of self to create working therapeutic relationships (Goffman,1959). This reminds us of Ward’s (2008, P. 189) “*matching principle*” mentioned earlier. Solomon and Siegel (2003) explains how “*relationships can nurture and heal the mind*” (p. 3). Howe (2011) explains how even one relationship is capable of counteracting trauma. Heydt and Sherman (2005, p. 38) and Reupert (2007) state that activities promoting an oversharing of personal details have the propensity to retraumatise learners while potentially leaving them unsupported. LIT PD learners are supplied with contact details for LITs internal and external support services. PD learners sign a confidentiality and disclosure document in 1st year explaining disclosures are not necessary in 1st year PD. However, as Heydt and Sherman (2005, p. 38) and Reupert (2007) agree, curriculum should not turn reflection into an intellectual endeavour, neglecting and avoiding arising emotions. This is in complete contradiction to what Urdang (2010) suggests, advocating video labs and observations to convey self-awareness and inner world learning in a purely academic endeavour. Whilst this would minimise over disclosing/sharing, it would stunt the development of self-awareness, which is risky because as exciting as it may be to uncover and discover aspects of self, uncovering and discovering can be anxiety provoking endeavours. Learners may not wish for others to know the self that is

uncovered but that self is required for the practice of SCW and other helping professions and cannot be sufficiently learned through video labs and observations.

This literature review points to the idea that reflection should not be a solely intellectualised component of the curriculum. If there is trauma and woundedness within the learners' experiences, it is important to be aware of this before working with other vulnerable individuals. It is also necessary to remain vigilant and present to recognise possible triggering, trauma, and retraumatisation of learners in PDG (Bettelheim, 1950, p. 113). The support of an attuned facilitator and empathic PDG members may offer more support than if the first time this woundedness or trauma surfaces is when working with a vulnerable individual. In the practice arena, co-workers, managers, or supervisors are not looking out to see if and when SCWs are triggered. It simply is not viewed as their role, as their main priority are the individuals availing of the service. Having engaged in PD learning and self-evaluation, which forms part of the PD assessment procedures (see appendix L), assists SCWs to recognise when and if they are likely to be triggered. The next section briefly focuses on PD assessment and addresses some of Spencer's (2006) assessment concerns mentioned in section 3.2.

PD assessment

Seeing PD as an organic or holistic unconstrained entity, which can lead absolutely anywhere, one probably wonders how can a PD curriculum be devised and assessed if I am constrained in this matter by a Bologna style outcomes competency based education. Spencer (2006) communicates the difficulty she experiences writing PD LOs. Over the four years of the PD programme, there are 29 LOs to be met. A breakdown of how these LOs (Appendix K) are assessed is provided (Appendix L). All PD assessment is through continuous assessment, reflective essays incorporating any relevant theoretical material, journals and group exercises, with feedback provided through a grading rubric. Connor (1994) concurs journals or written assignments are possibly the only equitable manner in which to assess PD learning. However, group assignments and co-facilitation assessments are also incorporated into the PD module. An external examiner, with experience in experiential learning provides verbal feedback to the PD team, in addition to a comprehensive written report at the end of each semester. The PD lecturer sets the assessment to meet the LOs.

PD assessment confirms progress and provides scaffolding for future learning within the PD modules and for future personal and professional life. It must lead to and inform effective learning (Race, 2006) and promote critical perspectives (Brookfield, 2007). Wheeler (2000) is also concerned with how to assess PD, particularly if the requirement for practice are practitioners who are “*personable, secure, open and sincere*” (p. 81). LITs PD assessment is designed to provide SCLs with the reflective space to critically evaluate their own understanding and assimilation of the material and its meaning and applicability to them as individuals and as members of the PDG (Maughan, 2017). Often knowing the self, from an educational perspective, relates to knowing self cognitively, with emphasis on Blooms Taxonomy or other such taxonomies, but PD provides cognitive knowing through PD lecture, in addition to unearthing subconscious and unconscious knowing through PDG (Irving, 1999).

Assessment for PD modules requires the ability to reflect and analyse learning in relation to the self and others. As well as reliance on academic literature, assessment relies on the learner assessing and analysing their own emotions and feelings in relation to their academic and experiential learning. In order to assess PD, learning has to have occurred. The next section examines the factors that enhance PD learning.

3.5 Factors Enhancing PD Learning

A number of factors enhance PD learning such as Self Determination Theory (SDT), emotional regulation, experience, woundedness, social learning theory and self-awareness. These factors will be examined in this section. Stereotypes, stigma and labelling are also briefly mentioned in this section. This section also provides an overview of PDGs, effective group facilitation and group dynamics respectively.

SDT holds relevance for PD learning and is a theory of human motivation, health and development. To achieve basic PD and self-regulation, intrinsic motivation must be present within the individual and aligned with their psychological needs (Ryan and Deci, 2018). Some psychological needs include self-esteem, competence, relatedness, and autonomy. SDT is “*concerned with how social-contextual factors support or thwart people’s thriving through the satisfaction of basic psychological needs*” (Ryan and Deci, p. 3). In other words, PD learners are likely to be self-determined when their competency, connection, and autonomy needs are satisfied.

Emotional regulation is defined by D'Avanzato, Joormann, Siemer and Gotlib (2013) as the process of controlling one's emotions through applied strategies. Hill and Updegraff (2012) suggest that practices such as mindfulness techniques and meditation improve emotional awareness, vital for healthy emotional regulation (Siegel, 2005). Attunement and regulation of emotions occur as individuals learn to work with intense emotions such as fear, shame, and grief with acceptance and kindness (Germer and Neff, 2019; Siegel, 2007). In addition, Cozolino and Sprokay (2006) note how the facilitators capacity to tune into learners generates "*a biological state in the brain that makes it better to incorporate new information*" (p. 14). This complements Howe (2011) and Siegel's (2005, 2007) thinking mentioned earlier in section 3.4. In other words, facilitators can contribute to learners' emotional regulation through their attunement to PD learners, which stems from experience.

Experience was deemed the "*highest authority*" by Rogers (1961, p. 23). His own experiences were considered the standard from which to measure validity. Experience, according to Rogers (1961), is the authority and trumps everyone's ideas. Experiences are visited and revisited by the person to arrive closer to calculating truth in "*the process of becoming in me*" (p. 24). Nothing, and Rogers means nothing, can take precedence over one's own experiences. Our own experience is not convincing because it lies within infallibility. It provides the foundation of authority simply because "*it can always be checked in new primary ways*" allowing this infallibility to always be "*open to correction*" (Rogers, 1961, p. 24). PDG provides the environment for this infallibility to be further explored.

Numerous resources are attributed to enhancing PD, including and not limited to awareness of our competencies and anxiety causing scenarios (Johns, 2006). Johns (2012) validates this statement when he acknowledges engagement in PD is a lifelong endeavour, applicable to all aspects of life, personal and professional. Thoughts, feelings, and actions are further understood within PDG, thus helping and supporting individuals worked with to replicate these. To quote Johns (2012), "*those that help others grow, also grow*" (p. 16). This suggests that not only are PDG members growing but so too is the facilitator, if they are open to these experiences regardless of the trauma experienced in their own lives.

It is well known and documented that the helping/caring professions attract those who have or are experiencing trauma within their own lives (Rajan-Rankin, 2014; Zosky,

2013; Wilks and Spivey, 2010). SCLs have been identified as one such group that have a propensity to suffer from poor mental health, yet aspire to work with the most vulnerable populations in society (Kotera and Maughan, 2020). More than a third of SCLs reported serious depressive symptoms, with over a third having had suicidal thoughts during their lifetime (Horton, Diaz and Green, 2009). Fahy (2007) found SCWs are affected by more post-traumatic stress syndrome symptoms than those of the general population. Zosky (2013) concurs and acknowledges professionals carrying personal trauma will most likely have adopted negative belief systems, with the potential for counter-transference to occur when interacting with others. As we know, the vulnerable are most likely to be those most negatively impacted. What is seldom mentioned, or credence given to, is the possibility for positive interactions, whereby the “wounded” professional may display authentic empathy and compassion towards the individual worked with once they have undergone some personal work themselves around their own woundedness. This mirrors Jung’s experiences (Dunne, 2002).

When PD is operated as an experiential group, countertransference feelings aroused in the facilitator can be strong (Woolfe, 1992). Awareness of self, transference, and countertransference, coupled with appropriate use of boundaries, compassion and empathy, recognition of possible and actual triggers, and the appropriate responses or actions would seem possible with engagement with PDGs or similar, and interweaving professional knowledge with the “*use of self*”, a term adopted by many helping or caring professions and authors. In agreement with Rajan-Rankin (2014) exposure to unfamiliar and/or distressing information and experiences can cause stress and disturb current and embedded thinking. As a result, the expected modification/(re) alignment of the professional self with the personal self can be conceived as overwhelming, threatening, with sensory overload, and alarming and painful thoughts. Recognising and connecting with past traumas and working through them in PDG, or realising counselling is required in order to ensure professional self and boundaries are maintained, is the least we should expect from any professional training programme preparing learners to work with vulnerable individuals. Furthermore, PD engagement is well placed to alert PDG members to the possibility of being triggered during their PEP and other modules, including PD, Psychology, electives and professional development modules.

Thinking, among others, of Jung's (1951), Remen (2010) and Martin's (2011) "wounded" writings demonstrate that despite carrying woundedness and trauma, SCLs have the capacity to become competent SCWs practising safely. This capacity can be further enhanced having engaged with the woundedness and trauma during the course of their training and beyond. Jung's "wounded" past was a key aspect that shaped this vision of new professional understandings because reflecting on his own past difficulties and analysing them, he promoted future growth in supporting others, coining the term "*wounded healers*" (1951). Campbell and Moyers (1988) assert that

Each of us is a completely unique creature and that, if we are ever to give any gift to the world, it will have to come out of our own experience and fulfilment of our own potentialities, not someone else's (p. 186).

This can be achieved through RP and self-awareness. Under the following conditions, PDGs are broadly known for developing self-awareness for SCLs. These conditions include the level of facilitator guidance, group cohesion, challenge from others and the SCLs own personal qualities. Qualities such as bravery, humour and honesty (Lennie, 2007). PD was defined earlier in section 3.2. Yet, Brown (1994) and Konopka (1971) expand on these definitions when Konopka (1971) defines the role of group work as a method allowing "*individuals to enhance their social functioning through purposeful group experiences, and to cope more effectively with their personal, group or community problems*" (p. 123). According to Rokeach (1973), Fook (2004), Corey, M.S, Corey, G., and Corey, C., (2014), Buckley (2012) and Banks (2012), often an individual's values and beliefs come from life experiences, especially earlier experiences within the family and community which they also deem to be true. Thus, it is important to be aware of assumptions, beliefs, and values, as they may impact on both behaviour and, moreover, practice. Attitudes, values and beliefs are a part of us and can not only be challenged but solidified by being exposed to others (Satir, 1988). Beliefs have been defined by Nilsson (2014) and Corey et al., (2014) as ideas that we consider to be true, with values seen as the concepts, standards, and or principles deemed important to aid our navigation through the world and in our interaction with others.

Contributing to learning and growing in group is dependent on numerous contingents but most important is self-awareness. Schwartz (2012) asserts values truly register in our awareness when aspects of a situation under consideration present conflicting implications for conflicting values we currently appreciate and revere. Self-awareness,

according to Lyons (2013), Beddoe, Ackroyd, Chinnery and Appleton (2011), Langer (1989), Ownsworth, Young and McFarland (2000) and Urdang (2010) is key for SCWs and their professional use of self, and it is vital that SCWs know and understand their own personality, attitudes, values and beliefs to avoid any undue influence on their practice. Self-awareness is further examined in section 3.6.2. Baluch (2000) detected stereotypic gender differences amongst learners. Male learners may strive to suppress, ignore, or disregard their emotions when making decisions, while females may become overwhelmed by their emotions, lacking the confidence to trust their gut instincts.

Deprived of access to the experiences and perceptions of others, renders individuals deprived of the “*raw material of growth*” (Mortensen, 2009, p.19). PDG offers the opportunity to access the “*raw material of growth*”. Without specifically naming it in the PD curriculum or LOs, PDG is well situated to casually address stereotypes, stigma and labelling. Stereotype has many definitions, but for the purposes of PD, a stereotype can be defined as “*a cognitive structure that contains the perceiver’s knowledge, beliefs, and expectations about a human group*” (Hamilton and Troler, 1986, p. 133). Accepting this definition of stereotypes, when participating in the PDG, prior knowledge, beliefs, and expectations about a group of individuals is subtly tested. This is also true for stigma and labelling. Social identity theory, according to Goffman (1990), recognises stigma as an entity that prohibits complete social acceptance for those in our society. Labelling theory affirms one group of people are designated a ‘*label*’ resulting from previous incidents or behaviours considered outside societies norm. (Becker, 1963; Larsen and Lubkin, 2013, p. 62). To this end, Cooley’s (1905/2015) ‘Looking Glass Self’ noted that we tend to look to society to gain an image of ourselves and the image that returns becomes our self-perception. The work of Mead and Strauss (1964) and Mead and Morris (1972) shares similarities with Cooley’s findings and can give an insight and appreciation as to why individuals behave the way they do, depending on the situation. Cooley and Meads’ work, according to Glassman and Hadad (2013), show that inner abilities, if guided in the right direction, can overcome external behaviours. It is expected that PD can provide that guidance.

However, it is important to be aware how the facilitator’s style of questioning could either consciously or unconsciously lead the learner down a path of the facilitators

choosing. Particular attention is taken of this in the methodology proposed for this research. Open ended questions are perhaps the most beneficial in eliciting deeper thinking and broad responses from PDG members (Garvin, 2016). This may lead to one group member's contribution sparking another member's thoughts. It is possible they may not have realised they felt that way too until it was verbalised by another PDG member. As Corey et al., (2014) confirm, the questions and realisations can support group members to recognise and assimilate their learning into daily living. To overcome stigma, stereotypes and labels (Endendijk, Groeneveld, Van Berkel, Hallers-Haalboom, Mesman and Bakermans-Kranenburg (2013), one would hope that at the end of their PD learning, graduates would have consciously and/ unconsciously incorporated social learning theory. According to Bandura (1962a cited in Bandura and Walters 1963) there is considerable evidence that learning may occur through observation of the behaviour of others even when the observer does not reproduce the models responses during acquisition and therefore receives no reinforcement. PDG learning has much in common with social learning theory, from the perspective of learning with and from others, which occurs in PD. Furthermore, self-efficacy, according to (Bandura, 2010), is an individual's sense of their abilities, of their capacity to deal with any particular set of conditions that life puts before them. Such capacity has echoes of resilience, also discoverable within PDGs. PDGs in particular, will be contextualised in the next section of this chapter.

PDGs

The purpose of this section is to look at groups in their broader meaning and narrow this down to PDGs, particularly as to what PDG work encompasses. A group, as Forsyth (2000) observes, is a collection of people, who at first glance, may seem unique, but each possesses that one critical element that defines a group: *"connections linking the individual members"* (p. 3). This definition was amended by Forsyth (2005) to include *"members are linked together in a web of interpersonal relationships"*(p. 3). This is not altogether true for PDGs, as group members are randomly assigned to group, and they can request swaps for a number of reasons, personal and or practical, before PDG commences. At the outset, the majority are strangers to each other, their only connection being SCLs in year 1, 2, 3, or 4. As the group progresses, interpersonal relationships can of course develop but they are often labelled a group long before this occurs.

PDG work is similar to Konopka's (1971) definition of group work, a method utilised in order to "*help individuals to enhance their social functioning through purposeful group experiences, and to cope more effectively with their personal, group or community problems*" (p. 20). Yet, PDG is that and more, as observed by Benson (2010), the group provides a space from which development is possible through interaction with others. However, for PD to be relevant and beneficial, it possibly relies on the quality of the interactions. Brown (1994) comprehensively defines groupwork as providing

a context in which individuals help each other; it is a method of helping groups as well as helping individuals; and it can enable individuals and groups to influence and change personal, group, organisational and community problems (p. 8).

Whilst true and valid, this does not get to the crux of defining a PDG. To some extent, this may, in part, be due to the individuality of each group, as a result of its membership but also what the group achieve as a whole and individually.

Luft's (1984) definition of group is most applicable to the PDG when he refers to a group as a "*living system, self-regulating through shared perception and interaction, sensing and feedback, and through interchange with the environment*" (p. 2). This definition also alludes to the work of the group. Without interaction, there would not be shared perception, sensing and feedback, through interchange with the environment. This brings us to look at group facilitation, group members, and the environment of PD in this next section.

Effective group facilitation

Whilst group facilitation was given a cursory mention in section 3.4, it is impossible to only consider group facilitation without incorporating group members into the milieu. Without PDG members, facilitation cannot occur, as group facilitation is closely linked with communication and leadership skills (Cilliers, 2000). Facilitation is important for this research as it is the foundation upon which PDGs exists. Ward (1999) explains, "*such learning can be promoted by aiming to "match" key aspects of the programme with equivalent elements in the practice context*" (p. 161). The template already exists in the PD curriculum but it is further enhanced through the methods adopted for facilitation. One of those methods is the incorporation of psychodynamic methods.

From the perspective of psychodynamic theory, as the group facilitator, Bion's (1994) "Learning from Experience" work has been influential in the style of group facilitation adopted. Bion (1994; 2010) used the concept of a container, and containment, to describe the process whereby an infant (group members) projects feelings such as anxiety onto the mother (receiver/facilitator). The facilitator should be capable of accepting them, be preoccupied with and contain these feelings, and then return them to the group member in a more simplified and manageable arrangement. This capability to contain these feelings will depend on the receivers/facilitators state of mind, emotional availability as well as their prior training. Bion (1962) described this as "Maternal Reverie", requiring the mother (receiver/facilitator) to deal with, and reflect on, these projections, which are critical components for effective therapeutic group work. It is then possible to transfer this framework to numerous interpersonal relationships such as SCW/individuals worked with and supervisor/supervisee. Concepts of containment and counter-transference then become vital tools for those engaged with emotionally wounded groups in the workplace. As mentioned earlier, caring and helping professions such as SCW attract learners carrying trauma and hurt that has manifested emotionally, with the possibility for leakage into group processes.

Bostrom, Anson and Clawson (1993) define group facilitation "*as a set of functions or activities carried out before, during, and after a meeting to help the group achieve its own outcomes*" (p. 147). Facilitator roles are outlined by Gavriel (2015), Furman, Rowan and Bender (2009), Collins, and Lazzari (2009), Kane (2006), Calhoun, Bartolomucci and McLean (2005) with the understanding that a competent facilitator is, capable of adjusting their time, revising levels of challenge or support, and focusing less or more on the task or process dependent on immediate group needs. Furthermore, as Clarke (2017) and Rose (2018) note, competent group work facilitation relies on planning ahead and knowing exactly what you are going to do and then being prepared. To some extent this is true, but PD facilitation, similar to SCW, is often unpredictable, and planning can only take a facilitator so far if one is to truly engage in what Harris (2014) promotes as, "*letting go of control over the outcome of a process and giving that responsibility to the group*" (p. 120).

Hunter et al., (1996) and Eller (2004) confirm that facilitators capable of setting aside their personal agendas for the sole purpose of focusing on the task and the entire group, tend to accomplish aims and objectives related to the task. Effective group

facilitation is a two-fold ability, bringing people together by empowering them to learn individually and collectively as part of their group. This is observable when group members deem themselves to have ownership of their group. Schwarz's (2002) Skilled Facilitator approach suggests facilitators should *"make the fewest and smallest inferential leaps necessary"* (p. 10).

Whilst constantly learning from the group, it is not the role of facilitators to interject unless for the benefit of PD learners. Verbal conclusions are often provided to learners to stimulate further discussion or confirm group members have been heard. The role of the PD facilitator is to respond to emotions, feelings and behaviours by reflecting them back to the group, ensuring group members feel, and are, understood and listened to by the facilitator (Cilliers, 2000; Westergaard, 2009). In agreement with Schuman (2012), competent group facilitation relies on the ability to build relationships, actively listen, and possess an acute awareness of body language. This is crucial to building trusting relationships with group members to support the group task similar to SCW practice. Shockley-Zalabak, Morreale and Hackman (2010) share the view that often we are not consciously thinking about developing or incorporating trust as an element of our daily activities or interactions. These false assumptions about trust, they claim, *"unconsciously affect all that we do"* (p. 11). However, an attuned facilitator/professional should see every interaction as an opportunity to begin building trusting relationships, modelling for group members how to transfer this to their practice upon qualifying.

Heron (1999) portrays a facilitator as *"a person who has the role of empowering participants to learn in an experiential group"* (p. 1). Additionally, as Gavriel (2015) agrees, the skill is to respond to the needs of the group, which develop over time, in order to allow the group to move forward appropriately. Other skills identified by Kwok, Ma and Vogel (2003) are fairness, empathetic, and positive interactional skills. Here, the main role of a facilitator *"is to guide how the learners interact with each other by orchestrating the process and structure of the learning interaction"* (p. 186). Process, is the opposite of content. Process relates to the manner by which communication of behaviours are experienced; it is the how of the individual and the group experience. According to Benson (2010), *"Process is the way in which a group experience, the way in which a group discusses or acts together and is reflected in the quality of the*

group experience" (p.74). The role of the facilitator is important here to guide group members to these realisations.

Ward (1999, p. 162) confirms what learners attain from their "*professional training*" may be most likely obtained from the method of the learning "*process*", including the "*context*" just as much if not more than the content. Ward (1999, p 162) also agrees that the strength of this training relies on learners reflecting on their experiences, consciously and unconsciously, particularly their experiences of the following:

- the way in which they are treated (both professionally and personally) by the teaching and other staff;
- their observations of the congruence between staffs espoused views and their actual behaviours;

This unconscious reflection process exists when, for instance SCWs/SCLs, happen to refashion in one context such as supervision the dynamics of another context such as PDG (Ward, 1999, p. 162). Also, PD learners write about the above experiences in their PD journals as part of the assessment process mentioned in section 3.4.

PD facilitation relies on a non-directive approach, closed, in so far as group members remain the same once group commences each semester and allows the facilitator and group members the opportunity to engage in RP (Kurtz, 2020; Benson, 2010). Azer (2005) claims the facilitator should facilitate the conversation rather than providing the material. Providing material for PDG does not always equate to a directive approach. Dependent on the collective abilities and feelings of safety, sometimes a conversation arises from engaging with materials and then this conversation is facilitated. This concurs with Whitaker (2001) when he asserts the prudence of beginning with a safe activity and building up to more demanding activities. Again, this is all dependent on the needs of the group on any particular day. Learning, which according to Jarvis (2006), is the facilitator's role to empower group members to learn, will most likely be deeper when PDG members' are active participants in directing conversation and activities. Spencer (2006) is concerned that learning for quieter group members requires attention and suggests more structured activities should also be offered in tandem with non-structured group facilitation. To this end, Corey and Corey (2002) acknowledge "*Truly competent group workers have reasons for the activities they suggest to the group*" (p. 49). Contradictory to Spencer (2006), Doel, Sawdon and

Morrison (2002) found quieter group members brought a sense of calm to the group. Conversely, as Benson (2010) would agree, a facilitator wishing to keep control of the group and what is expressed, is likely to keep the group busy with materials and activities the facilitator finds safe. In other words, keeping to safer territory whereby unconscious/conscious collusion occurs between group and facilitator. This will result in an absence of anything requiring emotional support to be permitted to surface within the group. This will prevail with the provision of innocuous activities and materials. Explaining the theory and reasons behind the materials and activities and their influence on personal and professional life, as Nolan, (2012) Corey et al., (2014) suggest, may just go somewhere towards alleviating that which stifles the PDG, if the facilitator exerts tight control over the group.

Furthermore, Walsh and Andersen (2013) suggests group effectiveness can likely be confused when the facilitator equates effectiveness with group members acquiescing to the facilitator's wishes and preferred behaviours. For instance, as Bion (1961) suggests, "*we are consciously and unconsciously swayed by*" what other people's attitudes will be of us (p. 61). This affects group culture and prevents the group from discussing issues openly together as equals. Satir, (1983), and I, conceive "*that all people can grow. It is a matter of connecting them with their inner resources. This is the therapeutic task*" (p. 264); a task that embrace's "*a pedagogy of freedom, attended to with an ethic of care*" (Freire, 1998, p. 69). Collaborative group contracts also assist with the therapeutic task. The group contracts are devised and signed by all group members and reflect Buber's (2004) "I-thou" contract of mutual regard, confidentiality, trust, safe spaces of trial and error, all resembling family models of education (Joyce and Weil, 2004; Brown, 2008; Connor 1994; Hodge, Wright, Barraket, Scott, Melville and Richardson, 2011).

The effectiveness of a facilitator relies on when they recognise the roles within the group and what is happening because of those roles (Prendiville 2008; Brown, 2018). Furthermore, taking care of yourself as a facilitator is important. This is attainable when the facilitator is clear about the extent of their involvement in the PDG. In other words, being aware and maintaining the boundaries, recognising triggers, transference, and countertransference, and seeking regular clinical supervision ensure a safer PDG environment for all. As Northen and Kurland (2001, p. 365) correctly identify, questions asked should allow the facilitator insight into group members' capacity for analysis of

present moment occurrences. Of equal importance is their ability to negotiate undercurrents of difficulties and conflicts. Recognising the role of resistance and conflict ensures effective facilitation. In addition, this attests to the *“living and growing”* of the group (Prendiville, 2008, p. 65). However, the group should, where possible, conclude on a positive note (Webne-Behrman, 2006), following a negative, as this balances the energy within the group. To achieve the aforementioned requires, according to Nolan (2012), Lindsay and Orton (2014), and Smith and Smith (2008) a certain mind-frame on the part of the facilitator; a mind frame emanating from the ability to connect with group members’ thoughts and feelings while simultaneously being aware of their own thoughts and feelings. This requirement is an openness to the meaning of verbal and nonverbal communication and to, jointly, with group members, explore possible meanings and aid their ability to process group communications and interaction, individually and as a group. For instance, each group member can have a positive, neutral, or negative effect on the group as a whole. This is to be expected. Nonetheless, as Benson, (2010) asserts, *“anything at all in a group which can be observed, perceived, or reacted to is a communication”* (p. 182). Bion (1994/2010) and Vernelle (1994) believe that choosing to keep silent may convey additional insights in addition to affecting group processes. As Frankl (1992) observed *“When we are no longer able to change a situation, we are challenged to change ourselves”* (p. 135). Corey et al., (2014) assert, when group members engage as active participants, positive changes and expressions occur, equipping the learner for their future roles.

A facilitator can learn to empathically receive and express bodily-based nonverbal communications by tracking their own while noticing very slight changes in learners’ expression and emotion (Stanley, 2016). Being present with group members enables openings for insight, growth, and changes to occur which model for PD learners how to transfer this to their practice (Yalom, 2015). Up until this point, very little attention may have been paid by PD learners to the emotional content of their experiences whilst quickly trying to suppress or deny such feelings. It follows then that facilitating self-awareness practices, such as mindfulness, could potentially enhance learners’ ability to attune to their own internal processes, distress, triggers, and fears, to becoming adept at recognising and facilitating individuals worked with through a process similar to what they have experienced themselves (Stella, 2016).

Rose (2018) ascertained group facilitators require an acute sense of self-awareness. This level of awareness and attunement does not prevent personal reactions which are to be valued, if appropriate and justified, because the opposite would be a robotic/mechanical facilitation. The spontaneity demonstrates the humanness and realness of the interaction which could encourage group members to engage in this authenticity and spontaneity within the bounds of self-regulation. This also compares to spontaneity and realness in SCW practice (Storo, 2013). Another primary task of the facilitator is to personify a setting and atmosphere of trust for group members whereby they experience being enabled to work on their own while the facilitator turns over control and power in a considered way to the group (Lyndsay and Orton, 2014; Dennison and Secor, 2005). It is also the role of the facilitator to guide the group to appropriate and useful outcomes (Wilkinson, 2004; Britton, 2014; Mahal, 2015; Jones, 2020). Creating a relaxing and comfortable atmosphere better enables learners form trust and learn (Burnard, 1997). Another facilitation task suggested by Mechanic and Tanner (2017) is to offer emotional and practical assistance to deal with stressors which can be the difference between effective or deficient coping. Vygotsky (1997) stressed the importance of how “*through others we become ourselves*” (p. 105). According to Hughes and Youngson (2009) and Schuman (2012), feedback is a reciprocally valuable exchange of knowledge, often resulting in spontaneous brainstorming, problem solving and mutual support. Rogers (1969) captures the ethos of how significant learning is strived for during PD when he states:

We know that the initiation of such learning rests not upon the teaching skills of the leader, not upon his scholarly knowledge of the field, not upon his curricular planning, not upon his use of audio-visual aids, not upon the programmed learning he utilizes, not upon his lectures and presentations, not upon an abundance of books, although each of these might at one time or another be utilized as an important resource. No, the facilitation of significant learning rests upon certain attitudinal qualities which exist in the personal relationship between the facilitator and the learner (p. 105-106)

As Koile (1977) and Richards and Lockhart (1996) contend, teachers rank highly in the inadequate listening and interpersonal relations category. It would seem, even today, it is modules/subjects, content/theory that drives education. In fact, relational capabilities are generally overlooked in favour of a potential teaching candidate that can instruct with high theoretical content in the shortest space of time. Whereas, the relational candidate will connect the material to meet the needs of the learners in ways the learner is capable of assimilating into their own frame of reference. Similarly, group

dynamics also contribute to the success or failure of the group tasks. This next section expands on group dynamics.

Group dynamics

Rose (2018) confirms, group functioning is also reliant on group members' co-operation. Group dynamics are the processes that occur between group members and are made up of the members' internal thoughts and feelings, their nonverbal communication, the relationship between group members, as well as their expressed thoughts and feelings. All of these processes combined make up a group dynamic which helps the individual understand how each person's actions contribute to the group. As Corey and Corey (2008) correctly note, "*fear can stifle creativity and impair effectiveness*" (p. 30). This is true for group members and facilitators. Research thus far suggests that it is best that group feelings are shared, discussed, and worked through as a matter of urgency to avoid irreparable damage to group functioning and dynamics. Concerns/incidents do not dissipate if ignored, most likely group becomes a very unsafe space for group members who may feel abandoned, triggered, unsupported, or neglected by their facilitator. As Corey et al. (2014, p. 219) and Nolan (2012) confirm, group members are often on a precipice of wanting safety and taking risks. It is only to be expected that group members would be cautious and this again is why going at the group members' pace is crucial, as is ensuring a safe environment for group members is maintained. In addition, as Whittaker (2001) aptly notes, if feeling unsafe, group members will remain uninvolved in the group, whilst unable to physically leave. He also goes on to say group members will, nonetheless, succeed in isolating themselves from the experiences.

Often, as Corey et al., (2014) conclude, these unsafe feelings are a result of not trusting in the confidentiality of the group and not trusting disclosures or contributions will be treated sensitively. The opposite, according to Heim (2012), is observable when disclosures and contributions are heard, respected, and valued. As a result, a positive and safe environment ensues. Furthermore, the adaptation of a person centered approach, as opposed to an expert centered approach, increases the likelihood of a successful session (Heim, 2012). When group members are listened to sensitively, they tend to listen to themselves more compassionately and clarify their exact feelings and thoughts (Rogers and Farson, 1957). Displaying positive regard, a term coined by Rogers (1983), to every group member is vital for positive group dynamics, as it

conveys the nonjudgement of group members' contributions, fostering a non-judgemental environment for PDG. This is the building block for what Rogers (1961) sees as providing a relationship and environment conducive to instilling feelings of safety, from which group members experience the freedom to examine their inner world. Thus resembling PBL for PD. This freedom, as Jung (1961) suggests, allows group members to bring their own experiences to the fore for the purpose of shared understanding and meaning, providing the largest capacity for understanding and for learning new ways of seeing the world (cited in Newcomb, Burton Edwards and Hazelwood, 2015). In other words, as Rogers (1961) succinctly opines, group members would lower their defences and masks to encounter each group member authentically when they feel it is safe to do so. This may be, in part, related to what Nouwen (2014) states: *"in our woundedness, we can become a source of life for others"* P. 0). As Cheung (2014) acknowledges, with positive group dynamics growth occurs within the individual, but, it also extends outwards to other group members. Corey et al., (2014) believe, as do I, that *"the higher the level of trust in a group, the more likely members are to push themselves beyond their comfort levels"* (p. 290) and open up.

Brown (1999) also recognises, on hearing someone else open up, the relief group members can feel upon realising they are not alone in a particular circumstance. Frey, Fisher and Everlove (2009), Prendiville (2008), Brooks-Harris and Stock-Ward (1999) and Ward (1999) detail how creating favourable circumstances is crucial to optimising group outcomes. These circumstances include, what Murgatroyd (1995), O' Farrell (2006), Stronge (2018) and Corey et al., (2014) assert, credibility, appropriate authority, competence, openness and genuineness within the relationship with group members, being emotionally present, empathetic, compassionate, and upholding the boundaries to avoid over familiarity with group members. Within these favourable circumstances, as Teater (2014) and Brown (1994) affirm, group members within the context of group, provide assistance, a sense of belonging and support to each other when personal issues are raised, through the exchange of experiences. PDG is also the environment to test out and or learn new ways of being. Rose (2018) asserts, *"the capacity to reflect upon one's attitude, emotions, behaviour and thought is key ingredient in personal development"* (p. 20). All these attributes are consistent with self-awareness. Provocatively, Conley, Durlak and Dickson (2013, p. 296) claim *"psychoeducational"* or *"didactically oriented programs"* are rarely effective in

changing behaviours of adolescents or preventing problems, indicating that the same is true for higher education learners. The next section is concerned with the characteristics of PD Learning, PD topics and practices.

3.6 Characteristics of PD Learning -Elements and Practices

This section shares commonalities with the characteristics and practices of SCW discussed in chapter two. It is important to note that these characteristics/elements are not naturally separable as, often, crossover of subject matter is unavoidable. Elements pertinent to the PD module and PD processes that share commonalities with SCW include self, self-awareness, assertiveness, empowerment, reflection/reflexivity, relationship, triggers, self-esteem, vulnerability, life-story, boundaries, self-care, family, loss and grief, resilience, meditation/mindfulness and empathy. These seventeen elements share commonalities with SCL and SCW. However, due to the scope of this thesis I have chosen to discuss the following: self, self-awareness, assertiveness, confidence, self-care and RP. These elements of PD have a direct correlation to the overarching research question which can be more concretely observable in chapter nine, the discussion chapter. This next section focusses on the concept of the self.

3.6.1 The concept of self

As stated at the beginning of this chapter, how the self is conceptualised is immaterial to the process of PD and by narrowly defining the self leaves the way open to exclusion, as no matter how much we theorise on defining self, it is impossible to know how each individual defines their self or if identities are included in their sense of self. The self that attends PDG, generally, define themselves similar to Cooley's (2015; 2017), Allport (1955), Markus and Nurius (1986) and Higgins (1987) thinking. In other words, according to personality traits, such as shy, anxious, chatty and so forth, implying a mental construct or conscious self. Although, this is a good place to start, it is not all that the self is. Four years of PD learning provides the milieu to offer the ability to gain a more concrete self-concept and knowledge, individual to that PDG member. Knowing what and who impacts on that self-concept and self-knowledge including learning how does this self impact on others co-exists with Cooley's "looking glass" theory. Cooley's (1902/2015) definition of the looking glass self, mirrors, in its simplicity, the above when he states, "*simply any idea or system of ideas, drawn from the communicative life, that the mind cherishes as its own*" (p. 179). My reluctance to

provide a definitive definition of self is perhaps congruent with constructionist psychotherapists who view the self as unquantifiable and non-chronological (Gergan, 1992; Lax, 1996). Additionally, as Wheeler (2016) suggests, the self is intersubjective in so far as the process of self is also constructed from the domain “*of the inner worlds of other selves*” (p.109) too, in the experiential sense.

It is Seigel’s (2005) definition which comes closest to defining the self that is experienced in PD. He names self, first of all as a person (similar to Dockar-Drysdale’s, 1965 conceptualisations of a child), distinguishable from others, knitting the various elements of our existence together, persevering through uncertainties of “*becoming who we might or should be*” (p. 3). This is also similar to the thinking of developmental psychologists. Yet, this definition does not take account of the existence of the false self that is described by Dockar-Drysdale (1965). From a facilitator’s viewpoint, the role is never to impose upon group members who they think group members might be or might and should become. As this quote from Keynes (2018) shows: “*The difficulty lies, not in the new ideas, but in escaping from the old ones, which ramify ... into every corner of our minds*” (p. vii). It is the facilitator's responsibility to structure and organise a series of experiences that positively influence each individual's potential future experiences (Dewey, 1938/1997).

What is regularly observable in PD, similar to what Rogers (1961) theorised, is the use of denial and distortion by group members as tactics to avoid the anxiety and distress experienced when real and ideal self are not sufficiently aligned. The more our real self is aligned with our ideal self, the greater our true sense of self will be. Improved self-worth or self-esteem results from this congruence between the real and ideal self. The work undertaken by PDG members is towards an alignment between the real self and the ideal self. Leary and Tangney (2003b) credit humans with the unique ability to self-reflect, a capacity for introspection and consciousness that relates to all human activities in all facets of life, work, love, spiritual life and play. All this resides “*at the heart of the self*” (p. 3). As Chödrön (1993) admits, “*you must become used to the fact that things shift and change. Things are not certain and they do not last and you do not know what is going to happen*”(p. x). This is certainly true for PDG, SCW and most areas of life. Baumeister (2009) proposes this ability to self-reflect, a capacity for introspection and reflexive consciousness allows the confrontation of four fundamental problems of selfhood, namely; self-knowledge and self-fulfilment, around how we

construct meaningful and purposeful lives, self-definition around constructing an identity distinguishing us from and connecting us to others and finally self-in-relation, our interactions and coping with the social contexts and conditions within which we live. Two sociological theoretical perspectives have relevance here: constructionism, the meanings constructed as a result of engaging in the world being interpreted (a theme of this research, observable in chapters 5-8) and symbolic interactionism, concerned with exploring the culture and society within which the self is interacting.

Psychosocial identity theories, relevant to PD processes and experiences, suggest that identity development is the outcome of different states and experiences that individuals encounter throughout their life (Evans, Forney, Guido, Patton, and Renn 2010). Identity theories propose that identity development is the process through which individuals make sense of their cultural environment in order to strengthen their self-confidence and achieve self-realisation (Kim, 2012). PDG members have a multitude of identities or lose their sense of identity based on their initial perceptions of other group members, but as PD progresses across the semesters, identities can strengthen and evolve. Self-acceptance and learning about the self seem to be the catalyst to owning identities that were, until this point, kept covert. Learning about the self, or becoming aware of aspects of the self, is referred to as self-awareness and self-development (Holston and Taylor, 2016). Self-awareness is the focus of this next section.

3.6.2 Self-awareness

Self-awareness was mentioned throughout section 2.3 and is regarded as having a deep understanding of someone's emotions, along with their strengths and limits, values, and beliefs. This also involves being able to understand the effect their behaviour has on others (Holroyd, 2015). This, as the literature suggests applies to learners and PDG facilitators. Self-awareness theory described by Richards et al., (2010) and Duval and Wicklund, (1972) includes *"focusing on the self, enabling self-evaluation. When self-focused, comparisons of the self are made against standards of correctness that specify how the self ought to think, feel and behave"* (p. 2). RP is necessary for this depth of self-awareness to be achieved. Thompson (2015), Dunne (2002), and Burnard (1992) recognise self-awareness as perception of our customary responses to situations so that we can further develop positive qualities and are alert to negative responses or reactions that could impede effective practice. Thompson

(2015) confirms that attunement to the feelings of others necessitates the need to be in touch with our own feelings, and an awareness of how we are emotionally impacted by situations. Self-awareness can lead to more proactivity in our lives, and enhance our self-acceptance, whilst also inspiring the achievement of positive PD (Sutton, 2016). Sutton, Williams and Allinson (2015) convey enhanced work competency, communication, self-confidence, and wellbeing are related to self-awareness. Kay (2018) explains the benefits of being self-aware include awareness of our strengths, vulnerabilities, and any unresolved issues. As Moskowitz (1978, p. 4) asserts, *“what greater knowledge can we give our learners than knowledge of themselves?”*

Koprowska (2010) discusses the process of learning new communication skills, and how it requires self-awareness at a greater level than usual. Effective communication, particularly intrapersonal communication, relies on our knowledge of self and the awareness of how our communication is likely to impact on others. The more we are in tune with self and understand self, the more we are capable of adapting our own behaviours in order to bring change to the effect/affect that we have on others had we proceeded without that self-knowledge. Adapting our own behaviours is crucial in all aspects of life but most importantly when working with vulnerable individuals. Lalor and Share (2013) provide similar views to my understanding of self-awareness; our self-awareness entails a process whereby reflection on thoughts, feelings, attitudes, and beliefs are activated, in addition to exploring, with a view to knowing, why we react in certain ways and in certain social situations. O'Connor and Murphy (2006, p. 213) acknowledge the importance placed on PD is learning about one's "Self" in order to become more self-aware. As Sieff (2015, p. 74) notes,

We have to question ourselves time and again. Key is asking the right questions – the ones that will allow our hidden truths to emerge into consciousness. The answer is lying silently in the unconscious, waiting for the “right” question to be asked.

Monat (2017) and Jabr (2012) take a rather simplistic view to the definition of self-awareness when they assert that self-awareness and consciousness are similar; where self-awareness is recognising our own consciousness and having an understanding of our own existence. To be self-aware is to be conscious with the realisations that we are thinking beings, capable of thinking about our thoughts in a mindful manner. We also understand self-awareness includes locating and examining the unconscious thoughts too.

Stella (2016) explains how, educationally, learners' unexpressed feelings in the PDG often manifest themselves in avoidant behaviours such as blank staring, withdrawing effort, and being opposed to contemporary methods of learning. Holtz Deal, Bennett, Mohr and Hwang (2011), in their study of a training model for PEs, found learners with an avoidant attachment style tended to disregard their learning needs, lacked awareness of any issues with their performance, and were unwilling to avail of learning opportunities, and were slower to embrace change. If learners are not facilitated to become aware of their relationship with emotions and resultant behaviours, this unconscious acting out of their habitual patterns will prevail in their practise. Flores (2017), Mahon and Leszcz (2017) and Black (2019) suggest that attachment style is amenable to change through relational interactions in groups. In complete agreement with Saunders et al., (2007) and Stella (2016), unless learners discover how to recognise and attune to their own avoidance patterns, these behaviours will manifest in their professional lives, hindering their ability to establish an effective therapeutic relationship. Also, the journey towards self-actualisation includes theories (Maslow, 1943, 1954; Rogers, 1951) whereby increasing self-awareness is seen as beneficial, not only to the practitioner, but also in facilitating the process of the work, in particular typical responses to stressful situations. Rogers (1961) believes, *"it is a very paradoxical thing--that to the degree that each one of us is willing to change himself, then he finds not only himself changing; but he finds that other people to whom he relates are also changing"* (p. 22). This is similar to Johns (2012) view from section 3.5.

Fully engaging in PDG may derive from the capacity to accept less desirable personal qualities. According to Cross and Papadopoulos (2001), this is only possible for people with a secure sense of self and good self-esteem. This is contrary to my belief, if this was true, a considerable number of learners would be precluded from fully engaging in PD. This brings to mind Argyris' (1976) theory of double-loop learning, a learning style that facilitates learners in assimilating new information, in addition to developing new skills useful in challenging established and perhaps unhelpful ways of thinking, feeling, and acting. Self-awareness is the first stage in developing emotional intelligence (Goleman, 1995). Schoenholz-Read's (2000) research confirms that when learners report the broadening or stretching of their perspective, they feel emotionally affected by their learning. Some report increased patience, empathy, and self-confidence and describe being less reactive to the ideas of others, more able to listen,

and being able to appreciate different points of view. As we develop this awareness, Knott and Scragg (2016) note that our behaviours become more regulated, leading to more affective and effective professional and personal interactions. Practicing self-awareness culminates in those individuals being more emotionally invested in meeting the standards required of them (Duval and Silvia, 2001; Sheppard, 2007). Assertiveness is key to implementing that self-awareness in practice and is the focus of this next section.

3.6.3 Assertiveness

Alberti and Emmons (2017) found people demonstrating very poor assertive behaviour developed into those who doubt themselves and who continuously seek guidance from others, which seems to be the opposite of acting on self-awareness or developing improved confidence and self-esteem. Yet, seeking guidance does not seem to equate to poor assertive behaviour as far as SCW is concerned. Failure to be assertive will most likely have consequences leading to submission, exploitation, resentment, aggression, misunderstanding, and negativity (Feltham and Dryden, 1993). It is important to be aware of assertiveness and incorporate assertiveness when the need to be assertive arises, and where you expect that, by doing so, outcomes and goals will be achieved (McBride, 2017). Assertive communication allows others to know our thoughts and feelings. It also allows others to know how their negative behaviour affects others, providing an opportunity for them to change that negative behaviour (Schwartz, 2006). In addition, with assertiveness, you are protecting yourself without abusing anybody else in the process (Egan, 2014; Schwartz, 2006; O'Brien, 2013; Van Servellen, 2009; Hargie, 2011; Peneva and Mavrodiev, 2013; Kattan, 2009).

Self-awareness involves getting to know, like and be in charge of the authentic self (Bishop, 2013; Moss, 2020; Hargie and Dickinson, 2011). Where these necessary skills such as being in charge of self and confidence are lacking, it is assumed that learners should be assisted to acquire assertiveness skills and pass those skills on to the individuals they will work with in practice (Stoykov, 2020; Grant, Kinman and Baker, 2013). Thus, assertiveness is the ability to express oneself with confidence. Carver and Scheier (1998) assert that confidence is firmly associated with affect; evaluation of threats and the ability to cope with these threats mutually increases an emotion and confidence level, each effecting the other. The aims of assertiveness, according to Allen (2007) and Schwartz (2006), is to assist group members gain more

confidence, achieve more honesty with themselves and others, and feel more empowered to implement and shape decisions that honour their own needs and feelings whilst also becoming more aware of their own and other people's rights through RP.

3.6.4 Reflection

RP has numerous connotations with some areas of overlap. This section, similar to other sections in this chapter, is concerned with these terms as they relate to PDG and its members. There is also overlap here with SCW practice and RP discussed in Chapter two, section 2.3.3.

An understanding of the importance of RP comes from Jasper (2003), Brookfield (2009) and Graham and Megarry (2005) who contend that RP in health and social care professions is an essential tool for helping SCLs make associations between theory and practice, enabling the development of knowledge and skills necessary to adapt to becoming a professional practitioner, with all the unpredictability this entails. Lishman (2015) conveys the importance of scrutinising one's work, which, crucially, relies on the ability to be transformative. Saylor (1990) deems one's ability to reflect as essential for competency, providing an occasion for self-evaluation, essential, in my view, to increase or maintain professional standards as a facilitator and for SCLs engaged with their PEP and, later, SCW practice. Collington and Hunt (2006) consider the transition towards RP to have been slow and incomplete thus further necessitating its reinforcement for learners.

As Downie and Basford (1998) attest, without reflection, experiences would remain unexamined, with the full potential for learning not fully realised. Bruce (2013) acknowledges *"Reflecting in and on practise is necessary for students to achieve professional competence and confidence..."* (p. 99). For PDGs, journals initiate the process, whereby *"Reflective writing in health and social care is a way of evaluating and improving practice"* (Keeling, Chapman and Williams, 2013, p. 98). Reflective journaling enables SCLs to note any underlying feelings, thoughts, or emotions that have escaped their conscious awareness. Within the space created for journal writing, the *"real self"* can emerge and be examined without interference from others, in addition to discovering *"who and what we are in practice, and why we act as we do"* (Bolton, 2010, p. 4; Brookfield, 2009; Sampson, 2004). The reflective journal is a

requirement for SCLs throughout their four years of PD learning. The major element of good reflective practice is to base experience on reflection. This can best be achieved through the keeping of a diary or log of events that has occurred (Parker, 2010). For the most part, journal writing is an individual reflection on self. Boud et al., (1985) expand on this by asserting that those reflections lead to “*intellectual and affective activities in which individuals engage to explore their experiences in order to lead to new understandings and appreciations*” (p.19). This supports the notion of the group members’ preparedness to learn, not only about themselves, but in relation to others within the confines of the group experiences. Manning, Cronin, Monaghan, Rawlings-Anderson, (2009) found learners perceive reflective groups as providing them with coping mechanisms to lessen the overwhelming demands of the practice environment and this provided more perspectives on situations. They also found the skills of the facilitators enabled them to see issues from a variety of perspectives and guide them to new insights. The learners also commented how valued the confidential nature of the sessions were to them.

Conversely, RP can be unpredictable. Higgins (2001) believes RP can lead to blindness regarding moral issues and suggested moving toward cultivating a “*practical wisdom*” (p. 93) which would rectify areas formerly neglected by Schön, namely ethical and moral issues. It is impossible to predict what or why any individual will learn or indeed if they learn at all (Boud et al, 1993; Hunt, 1998). Furthermore, Meierdirk (2012) raises the question, are educators and social constraints restricting learners by imposing their parameters for reflection on them? The studies and critiques that exist tend to focus on the notion of accuracy in the process of remembering or perceiving. The strategies advocated to overcome these critiques and aid reflection, include reflective journals, supervision and/ peer discussion, many strategies rely solely on memory. The issues of bias in forgetting and selection suggest that accurate reflection may be either impossible or so fundamentally flawed to be of little value (Newell, 1992). Farrington (1993) suggests that, with hindsight, people commonly exaggerate what could have been anticipated. It has been suggested that without structure and supervision, reflection may not progress beyond being cathartic (Johns, 2017; Saylor, 1990). Evidence from the literature suggests SCLs/SCWs are unlikely to engage with RP solely for cathartic purposes, generally, those engaging in RP are doing so for the purpose of implementing learning from the reflection which in turn will improve practice, the results of which should filter down to the individuals worked with. As

previously discussed under assessment, reflection and RP make up a large proportion of the PD assessment process over the four years and looking at self and self in relation to others. This next section looks at relationship with self and others.

3.6.5 Relationships with self and others

Since PDG work and SCW are relational endeavours, relationship has been interweaved throughout this chapter. Mentioned earlier, the facilitation of significant learning rests upon certain attitudinal qualities which exist in the relationship between the facilitator and the PD learners (Rogers, 1969). One of the initial tasks of PD is to get to know the group members' names as quickly as possible and for group members to learn each other's names too, as this expedites the relationship forming process. From a psychodynamic perspective, relationship development in PD most likely centres around the role that anxiety plays; examining whether anxiety is named or unnamed, whether or not it should be, how are group members and I responding to and managing anxiety in the PD room and so forth. Although PD can be a source of anxiety, it is also a relational endeavour and a meeting of group members where they are at, with a focus on the positives. It is not taking behaviours personally but used as an opportunity for insight into what the group member is trying to communicate.

Rosenberg (2012) affirms we all have numerous needs, where acceptance and attention rank highly, and when needs are not met, acting out and responding with varying negative feelings is to be expected. He also stresses the importance of not taking the behaviours personally and instead looking beyond them to discover what needs remain unmet and how to attempt to meet them. Again, the work of Winnicott (1965) and Dockar-Drysdale (1990) inform us how to meet these unmet needs and understanding that when connected, positive relationships benefit the holistic health of the individual (Klein, 1962). Unbearable emotional responses to anxiety-provoking everyday experiences can be digested and tolerated by facilitators in what Winnicott (1965) and Dockar-Drysdale (1990) refer to as "*good enough*" responses. This is made possible when facilitators acquire suitable supervision. The relationship with the self is essential to self-care, and mindfulness is one of the ways of developing that self-awareness, self-regulation, and finding balance.

Biestek (1961) provides what he calls the seven principles of the casework relationship which are entirely transferable to the facilitator/group members and accompany the

group members whilst undertaking their PEP and later in their practice as discussed in chapter two, section 2.3.1. The seven principles are individualisation, purposeful expression of feelings, controlled emotional involvement, acceptance, non-judgemental attitude, self-determination for group members, and finally confidentiality. Miller, Forcehimes and Zweben (2019) and Ardito and Rabellino (2011) suggests for there to be a meaningful relationship in SCW, a connection is required for positive healthy ways of working effectively with individuals worked with, to enable them have a good sense of self-worth and a strong sense of identity. Rogers (1961) proposes that accepting the self and the capability to manage one's self in relationship with others whilst simultaneously encouraging the reciprocal respect and freedom necessary to the other, culminate in the basic criteria for a fully functioning personality. Healthy meaningful relationships are the bedrock for vibrancy in life and work (Stratton, 1999). Triggers, the focus of the next section can prove problematic if the triggered person is not surrounded by healthy meaningful relationships.

3.6.6 Triggers

A key symptom of Post-Traumatic Stress Disorder is psychological re-experiencing of a traumatic event known as a trigger (American Psychiatric Association, 2013). Flashbacks can be experienced which can mimic a past trauma reoccurring with the experiencing of extreme emotional reactions. Triggers can occur when a specific stimuli from a specific encounter or environment simulates a past traumatic experience; *“Traumatization occurs when both internal and external resources are inadequate to cope with external threat”* (van der Kolk, 1989, p.389). This inadequacy activates memories of their traumatic experience and generally when this happens, connection with the present is severed until the triggered individual is capable of coming back to the present. Triggers are usually unanticipated, particularly if the triggered individual lacks some degree of self-awareness. It is rare for any group member or facilitator not to have arrived at the age they are without having experienced some level of hurt which has the potential to be triggered as a result of group dynamics and group processes. As Tarshis and Baird (2018) and Orlinsky, Schofield, Schroder and Kazantzis (2011) agree, reactions and how individuals are triggered is individual but must be attended to prior to engaging with vulnerable individuals. This was discussed earlier in chapter two, section 2.3.2.

Newcomb et al., (2015) highlight Jung's theory that, in order to heal, we must understand our own pain to assist us in transforming our flawed pasts into strengths and to provide our strengths as a source of healing to those who are unable to cope effectively with adverse feelings. However, Zosky (2013) highlights learners that have past trauma experiences may encounter Post-Traumatic Stress Disorder due to potential triggers from required modules. However, if group members begin to identify their triggers they can simultaneously learn coping strategies such as grounding and relaxation exercises, and also to name the mental and or physical representations of the triggering experiences either in PDG, their journal or subsequent therapy.

Zosky (2013) stresses the importance of the level of self-awareness the practitioner brings and the importance of resolving past trauma, aiming to maintain professional boundaries within the therapeutic relationship. This amplifies the importance of PD personally and as a professional working with vulnerable individuals including our SCLs. Kahn (2002) clarifies the relationship the SCW has with themselves and the importance of it. The SCW must be able to express empathy and have awareness of their own triggers and contain their own issues while working with individuals. SCLs can develop critical thinking as a result of triggering experiences which correlate with the idea that deep emotion activates double-loop learning (Cartwright, 2002; Argyris, 1976). It could be argued from the literature reviewed thus far, that PD promotes autonomy, self-regulation and opportunities to decrease the severity and episodes of triggering for SCLs/SCWs. Self-awareness and self-esteem are important constructs in bringing our awareness to, and offering coping strategies, to anticipate and manage possible triggers (Reimer and Christmas, 2020). Self esteem is the focus of the next section.

3.6.7 Self-esteem

As alluded to earlier in this chapter, section 3.6.1, Rogers (1961) notes the gap between self-image and ideal self is likely to be a measure of an individual's self-worth or self-esteem. Hartwell-Walker (2015) and Coopersmith (1967) define self-esteem as "*a personal judgement of worthiness*"(p. 4). According to Giddens (2009), self-esteem or self-worth reflects a person's overall subjective emotional evaluation of his or her own worth. It is a judgement of oneself, as well as an attitude toward the self. Engaging in PD requires the ability or the inclination to accept less desirable personal qualities. According to Cross and Papadopoulos (2001), this is only possible for people with a

secure sense of self and good self-esteem. Balance is key, as accepting less desirable personal qualities proportionately increases self-esteem and self-worth and allows the ideal self and the real self to become more aligned. Rogers (1961) further theorises, the more our real self or self-image is aligned with our ideal self, the greater our true sense of self will be; this congruence between the real and ideal-self results in high self-worth or self-esteem. In other words, to feel good about the self requires motivation to work toward an alignment between the real self and the ideal self and this is what both Rogers (1951) and Maslow (1943, 1954) refer to as the process of self-actualisation.

Tajfel's (2010) asserts personal identity is linked to social identity. Group membership assists individuals define who they are but self-esteem and confidence may be boosted if they view or evaluate their groups positively. Festinger's (1954) theory of social comparison believed we could not interpret our own actions and feelings without looking outward to the actions and feelings exhibited by other people. PD provides an environment conducive to looking outward to the actions and feelings exhibited by other people. New-found self-esteem or confidence is cherished as an individual's enthusiasm to undertake ventures and continue in the pursuit of their goals blossoms as does their PD and growth (Bénabou and Tirole, 2002). Aspects of PD and growth impacting professional development are: emotional intelligence, the ability to understand feelings of the individuals worked with, including the capacity to carry out tasks and responsibilities with confidence (Bartkeviciene, 2014). Laird (2013) notes that assertive professional practice requires a well-developed sense of self-esteem. Self-care, the focus of this next section, and self-compassion can provide the necessary space to continue to be professionally effective to carry out tasks and responsibilities.

3.6.8 Self-Care

Similar to PD, self-care is not definitively defined, evaluated or implemented (Griffiths, Royse, Murphy and Starks, 2019). Self-care denotes actions and practices regularly engaged in for the purpose of decreasing stress in an effort to sustain physical, emotional and mental health and well-being. Colman, Echon, Lemay, McDonald and Smith, Spencer and Swift (2016) from their meta-analysis found self-care to be efficacious for graduate students in professional psychology programmes. Self-care can be vital in moderating *“burnout, workplace stress, vicarious or secondary trauma,*

and other deleterious employment circumstances” (Miller, Grise-Owens, Owens, Shalash and Bode, 2020, p. 55). The results of their study around the implementation of self-care within the social work profession suggests that participants employ only moderate measures of self-care. They suggest this may correlate with areas of self-care on various curricula. Self-care is necessary to meet SCWs professional obligations through bringing their best self to their practice and thus minimise stress. Stress was discussed in chapter two. Stress is not a recent phenomenon and is experienced in a multitude of ways (Chen, 2013); as a state of psychological stimulation resulting when difficulties exceed an individual’s adaptive skills (Lazarus, 1966). Selye (1950, 1976), one of the first stress theorists, indicates stress is cumulative and adds up over time and is observed when coping abilities become overwhelmed. Being regularly overwhelmed leads to burnout and hence, self-care is often only activated once the burnout has manifested itself (Wise and Reuman, 2019). Stress is defined as a state of physiological and psychological response to actions that upset our individual balance in some way (Watts, 2014). Stress, as Harrison (2006) concludes, will become destructive when a loss of control is endured to the point where it induces a state of distress. There are numerous reasons why stress is a feature of SCW; most likely, in practice, SCWs are constantly switched on and are simultaneously drawing on internal, often unconscious, dynamics to make sense of these professional encounters. Self-care is therefore critical for one’s efficacy and achievement both professional and personal obligations (Johnson and Acabchuk, 2018). The proverb “*the shoemaker has no shoes*” by Burton (1621, cited in Skovholt and Trotter-Mathison, 2011, p. 5) is apt, as it describes how easily self-care may be neglected when, not only caring for others, but within the business of life. Willis and Molina, (2019) observe self-care is absent in many of the helping professions. Understanding that self-care is paramount for continued “*survival and growth*”, they lament that self-care has not been “*fully addressed*” within their profession (p.83). This may be due to the lack of empirical research examining the benefits of self-care (Salloum, Kondrat, Johnco and Olson, 2015). Compassion fatigue can result in underutilising self-care strategies (Van Heugten, 2011). Wise, Hersh and Gibson (2012) explain the importance of self-care for professionals’ improved practice and well-being. Colman et al., (2016) examined 17 studies for their meta-analysis and found that generally those who engaged in self-care had more favourable outcomes than those not engaged in self-care. They also discovered that seeking social support and mindfulness were two of three categories of self-care strategies employed.

Mindfulness is an element of contemplative pedagogies which are the focus of this next section. Many contemplative practices can contribute to improved self-care (Warren and Chappell Deckert, 2020).

3.6.9 Contemplative pedagogies

Contemplative pedagogies have been adopted in education for some time. Recently, they are gaining more traction as educators encourage promotion of learners' emotional regulation and more introspection and creation of knowledge rather than solely absorbing knowledge (Warren and Chappell Deckert, 2020; Barbezat and Bush (2014) and the ACHME organisation. Britton et al., (2013), Goyal et al., (2014), and Siegel (2007) realise that mindfulness is steadily becoming credited in psychology as effective in reducing stress, increasing self-awareness, enhancing emotional intelligence, and effectively handling painful thoughts and feelings.

Mindfulness can be described as “*a receptive attention to and awareness of present events and experience*” (Brown and Ryan 2003, p. 824). Barbezat and Bergman (2014), similar to Stella (2016), affirm that

contemplative inquiry is, at its root, about transforming relationships: the relationship of the student to the material being studied and, more broadly, our understanding of the interpersonal, intrapersonal, and systemic influences and forces which shape our individual lives and our society (p. viii).

Contemplative pedagogies also include mindfulness and meditation. Mindfulness can be conceptualised as “*the awareness that emerges through paying attention, on purpose, in the present moment, and non-judgementally, to the unfolding of experience moment by moment*” (Sieff, 2015, p. 152). Meditation can increase resilience and, is defined by Shapiro (1980), as a suite of practices, including mindfulness, which as stated above, rely on making a conscious attempt to “*focus attention in a nonanalytical way, and an attempt not to dwell on discursive, ruminative thought*” (p. 14). Mindfulness is considered a state of mind, observing and noticing each internal and external experience without evaluating, interpreting or judging such experiences (Good et al., 2016). Providing space for mindfulness and meditation practice increases self-reported happiness and well-being, changes which are corroborated by healthier EEG readings, heart rates and flu immunity (Davidson et al., 2003).

There is a surprising amount of evidence which shows that mindfulness based programs result in a positive impact on the psychological wellbeing of learners (Dvoráková, Kishida, Li, Elavsky, Broderick, Agrusti and Greenberg 2017; Beddoe and Chinnery, 2011; Gockel, Cain, Malove and James 2013). Mindfulness, if engaged with, necessitates reflection on, and awareness of, how we are feeling, incorporating awareness of the impact or affect on us. Being truthful to ourselves is a requisite of mindfulness, as is being comfortable with uncertainty (Kabat-Zinn, 2005; Heidegger, 2006; Wheatley, 1998). Uncertainty is a constant feature of PD and SCW practice.

Giluk (2009) concluded from her meta-analysis, individuals high in mindfulness may have increased tolerance for an extended array of thoughts, emotions, and experiences, since mindfulness training has found a reduction in stress reactivity and increased behavioural flexibility. It follows increased mindfulness practices equate to increased resilience, in addition to subjective well-being. This is borne out in the findings of an 8-week mindfulness based stress reduction online programme whereby participants reported higher levels of distress tolerance and resilience (Nila, Holt, Ditzen, and Aguilar-Raab, 2016). Charbonneau (2019) believes that “*mindfulness is an antecedent to resilience, in that mindfulness training improves resilience*” (p. 241). Centeno and Fernandez (2020) report empathy and compassion increased when their learners engaged in a mindfulness based programme compared to a cohort that did not engage with the mindfulness programme.

3.7 Summary

This chapter focused on the conceptualisation and operationalisation of PD, where PD was defined in a way to match the PD curriculum, LOs, and all the perceived fuzziness in between. Assessment procedures for PD were outlined in addition to the curriculum (see appendices J, K and L for further information). A key focus of this chapter was facilitation of PDGs in partnership with group members. This was an important feature of the chapter. The success of PDGs and meeting the group members’ needs relies on effective and competent facilitation. Facilitators’ have to be aware and adept at managing not only the group but themselves, in order to prevent group members’ experiencing adverse affects as a result of engaging with PD. A number of studies with similarities to PD were reviewed, as currently there is a dearth of studies examining PD for SCLs. Many studies noted the lack of empirical studies around PD, with no studies to date examining how PD modules transfer into practice (LaRocque,

2017; Moller and Rance, 2013; Payne, 2010). PD factors, PDGs, and group dynamics were explored, in addition to characteristics/topics of PD learning. Proust (cited in Land, Meyer and Flanagan, 2016) provides a truly apt quote that encompasses much of what transpires in PDG and this research when he declares: “*The only real voyage of discovery consists not in seeing new landscapes, but in having new eyes, in seeing the universe with the eyes of another*” (p. 14).

This chapter is the bedrock of the methodology chosen for this research, in so far as, PD is the case under examination. The chapter also provided depth to this research through examining the wider PD landscape beyond the LIT PD module. The characteristics of PD learning outlined in section 3.6 serve as a foundation for examining the research question in more depth. The next chapter will examine the role and practices of transformative education relevant to PD.

Chapter Four: Transformative Learning

4.1 Introduction

The previous chapter devoted to PD, examined how PD is contextualised, operationalised and its relevance to SCW practice. This chapter addresses educational and transformative learning and theories applicable to PD and practice education placement (PEP). This chapter is also important in addressing the research question “Is the PD module from LIT SCW HE programme relevant and beneficial for SCLs, SCWs and their PEs?”. Elements of sub-questions one and three are also addressed;

- How is PEP defined, conceptualised and operationalised?
- What role, relevance and benefit, if any, does PD have in SCW education, PEP and SCW practice?

Both former SCLs and PEs are best placed to answer the aforementioned elements of the research sub questions. PD in the context of this research is first and foremost situated within a teaching and learning pedagogy. It is only after four years of PD learning that PD can be examined in terms of its benefit and relevance to SCW practice. SCLs undertake 800 hours of PEP; four hundred hours in year two and four hundred hours in year three. Before examining if PD is relevant and beneficial to SCWs it is important to ascertain if PD is beneficial and relevant during PEP.

The initial focus of this chapter will be a brief outline of SCW education and LIT SCW programme and curriculum. PEP, another core element of the SCW programme and its potential, along with PD, to provide transformative learning experiences will be examined. Constructivism as a theory is mostly attributed to Piaget and Vygotsky and is usually linked with pedagogic approaches concerned with promoting active learning or learning by doing. The central tenet of constructivism is that learners construct knowledge for themselves, individually and they socially construct this knowledge simultaneously to their learning experiences. Hence, constructivism appears to reside within PD, PEP and SCW practice and its applicable concepts and theories which will be noticeable throughout this chapter.

Educational, humanistic, psychodynamic and transformative theories applicable and particularly relevant to PD and PEP will follow the SCW curriculum and PEP information. Transformational learning moments, according to Heilman and Clarke (2016, p. 40) are habitually “*traumatic, emotional and liberating*” leading to both “*emancipatory and anxiety producing*” feelings. All the aforementioned align particularly well with PD experiences and to a lesser degree with PEP and SCW practice. One of the principles of transformative learning is the concept of student-centered-learning (Scl). Rogers, (1983), whose theories were discussed in the previous PD and SCW chapters, has also integrated Scl into his general theories of education and will be further discussed in section 4.4.1. Piaget and Knowles are also associated with the theories of Scl and will be referred to again later in this chapter as will threshold concepts. This next section focusses on the SCW curriculum at LIT.

4.2 Social Care Work Curriculum - LIT

Curriculum is defined by Bernstein (1971) as that which equates to valid knowledge, and pedagogy and to the valid transmission of knowledge to the learner. As can be seen from Chapter three, the PD curriculum allows scope for the learner to make sense of the material, based on their own inner world and life experiences. Thus curriculum “*might function self-transformatively*” (Pinar, Reynolds, Slattery and Taubman, 1995, p. 515). When enrolled in a level 7 (B.A Ordinary Degree in Social Care Work) LIT SCW curriculum consists of six semesters and eight semesters if enrolled in level 8 (B.A Honours Degree in Social Care Work). Semester 4 and semester 5 are allotted to PEP semesters, consisting of 400 hours per semester. Curriculum was recently amended in order to map the SCW programme to the SoP. See Appendix J for the curriculum outline.

4.3 Practice Education Placement

This sections defines PEP and examines LIT PEP. This section also examines supervision, particularly supervision provided by PEs which is a core element of PEP. This section concludes with an exploration of professional boundaries. First, a description of PEP is provided below.

4.3.1 What is practice education placement

When conceptualised, the PD module is seen as personal growth and development, whereas PEP is seen as professional development. The view I hold is that both PD

and the professional development module linked to PEP should be offered as separate modules even though they are indistinguishably linked to each other, a view shared by others (Rønnestad, Orlinsky, Schröder, Skovholt and Willutzki, 2019; Wilkins, 2006; Hargreaves 2003; Kelchtermans, 2009). Unlike PD, there are very few detractors on the need for PEP in HE programmes, in particular SCW programmes (Bogo, 2015; Flanagan and Wilson, 2018). Yet, in general, PEP is just as difficult to define conceptually and operationally as PD due to the varying views of educators and PEs, some view PEP as an observational endeavour or a behind the scenes existence, whilst others prefer to provide the learner with as much exposure to the reality of SCW practice. However, I would posit PEP could be as personally and professionally transformative as PD. It is perhaps Bringle and Hatcher (2009) who provide the most apt definition of SCWs PEP. They state PEP is

...a credit-bearing educational experience in which students participate in an organized service activity that meets identified community needs and reflect on the service activity in such a way as to gain further understanding of course content, a broader appreciation of the discipline,... (p. 38)

The PEP brings the learner, PE, and the academic supervisor together in a tripartite relationship and straight away the learner is experiencing how to work professionally in a reciprocal partnership with others, particularly if/when difficulties arise for either the learner and or the PE. Instantaneously, learning previously gained in lectures, tutorials and groups can be seen as it is applied by PEs. SCLs observe real life events unfolding within the PEP service. Not only in PD modules is growth observable, but also in PEP when engaging with RP (Moon, 2015). Bringle and Hatcher (2009) confirm this belief, asserting that PEP leads to substantial growth, new knowledge, and ways of working for learners involved in PEP. Others such as Lovat, Toomey and Clement (2010) and Eyler, Giles and Schmeide (1996) include the development of social, moral, and emotional growth as a result of participating in PEP. It was Shor and Freire (1987) who notice that academics who promote personal and social transformation do so by permitting learners to wrestle with and critically examine social issues.

PEP is the ideal setting for learners to encounter various social issues such as poverty, inequality, social injustice, those who are disenfranchised and those who suffer from exposure to various adverse life experiences. Prior to PEP, through PD, learners have begun to explore their attitudes, values and their life experiences. Reflecting on the work of PEP and their own attitudes, values and life experiences can lead to further

deepening PD, since the learners are encountering real life experiences rather than theory and hypothetical case studies (McLeod, Vaughan, Carey, Shannon and Winn, 2020). A number of authors credit PEP with reductions in stereotyping behaviours, recognising similarities between themselves and individuals worked with, and gaining more empathic skills (Ngai, 2006; Sigelman and Welch, 1993; Kingsley and McPherson, 1995; Eyler and Giles, 1999). This bears similarities to PDGs, at the outset members may believe they would not have anything in common with another group member until they realise that they do. This is similar to Dewey's (1938) thinking about the nature of knowledge and society, coupled with his belief that the problems faced by humans lend themselves to purposeful reasoning to resolve those problems. Moreover, when engaged with learning facts and theories in the actual contexts where they occur gives them authenticity. In other words, talking in lectures about problems faced by others and how to respond is not as beneficial as the learning gained enmeshed in the actual context of where the actual problem is experienced. Dewey (1938) also held "*the belief that all genuine education comes through experience does not mean that all experiences are genuinely or also equally educative*" (p. 38); as some learners returning from PEP have confirmed this over the years.

PEP incorporates space for reflection, which is conducted in many ways, including written and verbal. Kolb's cycle is the most common reflective framework promoted for SCLs. A vital part of PEP is reflection on situations encountered with fellow learners, co-workers, academic supervisors and individuals worked with. This engagement with reflection is for the purpose of analysing theory in respect of practical situations, to examine alternative points of view and to make informed choices for future situations. It is vital for the SCLs to have a full understanding of critical reflection in order to draw the most benefit from their PEP (Fook and Gardner, 2013). As well as being an effective learning tool, reflection is also a mechanism by which the learner can show what they have learned and how they have done so. Assessment of learning during PEP includes the completion of a portfolio; which integrates a reflective diary by the learner, in addition to showing how their personal and professional goals have been met during their PEP.

PEP can also be aligned with critical pedagogy (Freire, 1971; Giroux, 1988) and "*applied experiential learning*" (Beard and Wilson, 2018, p. 48). Merging learning from the SCW programme and PEP requires the essential provision of conditions to apply

the concepts, ideas and theories to the interactive setting (Eruat, 2010; Gentry, 1990; Carter, Hickman, McDonald, Patton and Powell, 1986). Similar to PD learning, PEP incorporates regular reflection to assist the learner in matching their learning experiences to past, present and future experiences. As a pedagogy, PEP has many challenges including implementing relevant policies such as fitness to practice, handing over the meeting of LOs to learners and their PEs; the provision by LIT of a special purpose award in PE supervision for PEs and communicating any changes to curriculum (CORU based changes) such as assessments; and the SoP to be met by the learner under the guidance and supervision of the PE.

The academic supervisor (lecturer) grades the PEP placement portfolio based on what the learner writes about their experience and their reflection on those experiences. Whereas grading PD assessments, the facilitator is present and recognises the learning being assessed. There is an unspoken expectation that PEs will take responsibility for providing the opportunities where learners will develop SCW skills as opposed to PD, which provides opportunities, where these skills and traits adopted from PD can be applied to practice (Munro, 2011). Overall, the PEP pedagogy aligns well with the work of Howard (2001), in terms of the use of reflection, academic rigour, and partnership between the interested parties. A significant element of PEP is PE supervision. PE as an element of the SCW curriculum is the focus of this next section.

4.3.2 Practice education placement - LIT

As mentioned earlier, LIT PEP consists of acquiring 400 hours of SCW related unpaid experience over 15 weeks in the 2nd semester of year 2 and again in the 1st semester of year 3; weighted at 25 credits. Up until 2019, one scheduled tripartite meeting was convened with the SCL, PE, and academic supervisor (now it is two scheduled visits). This meeting reviewed the learners' chosen personal and professional goals (now personal and learning goals are based on SoP). The meeting now considers the progress of the PEP and explores any difficulties which may have arisen, with a view to a satisfactory resolution and identifies areas for further learning. Prior to undertaking the PEP, learners will have completed a module on professional development. Midway through the PEP, there is a mandatory call back day, whereby learners return to college for one day to explore and reflect on their learning. Learners return to college midway through their PEP and at the end of their PEP for a debriefing session. The PEP is assessed by the academic supervisor through the PEP portfolio with the PE

assessing the practical components of the PEP. In order to assess the learners' progress, supervision provides a framework from which assessment can occur. Supervision is the focus of this next section.

4.3.3 Practice education supervision

According to Irish Association of Social Care Educators (IASCE, 2009), supervision meetings are a way to afford learners a formal supportive environment. In this environment, it is hoped that they will learn and develop through their PEP. Professional supervision is a partnership process of on-going reflection and feedback between a named supervisor and supervisee(s) to ensure and enhance effective practice (O'Neill, 2004).

According to Knapman and Morrison (1999), there are four functions involved in effective supervision; managerial, developmental, supportive and mediation. Supervision offers a structured opportunity to discuss work, to reflect on practice and progress and to plan for future development (Lalor and Share, 2013, p. 184). Similar to Lalor and Share (2013), Hess (1980) describes supervision as a *"quintessential interpersonal interaction with the general idea that one person, the supervisor, meets with another, the supervisee, in an effort to make the latter more effective in helping people"* (p. 25). Concisely defined, professional supervision is *"an accountable process which supports, assures and develops the knowledge, skills and values of the individual, group or team"* (Skills for Care, 2015, p. 5). Supervision should also provide a sanctuary for staff and SCLs, where guidance and clarity can be sought and secured on matters, such as self-assessment, assessment of needs, desires and ambitions (Feltham, 2000; Westergaard, 2013; Page and Wosket, 2015).

Supervision is not *"a casual activity that takes place over a cup of coffee"* rather it is a *"regular opportunity to reflect on the previous work – the process as well as content"* (O'Neill cited in Lalor and Share, 2009, p. 184). It is worth noting *"the primary task for supervisors is to maximise the opportunities for students to learn for themselves"* (Ford and Jones, 1987, p. 64). During supervision, according to Share and Lalor (2009), effectiveness will be experienced when the functions of supervision are identified and understood from the very first supervisory encounter. This is particularly true when the supervisor, supervisee and organisations share mutual and realistic expectations regarding the applicability of supervision to their practice (Lalor and Share, 2009;

Richards, Payne and Shepperd, 1990; Hafford-Letchfield, Leonard, Begum and Chick 2008; Watkins and Milne, 2014). Expanding on Lalor and Share's (2009) views on supervision, supervision, for the most part, must be provided to SCLs and SCWs by a SCW. Often SCLs have reported less than ideal supervisory experiences when supervised by an individual from a discipline other than SCW. Literature is scarce on supervision provided to SCLs during their PEP from disciplines other than SCW. This is most likely due to supervision being provided within each discipline by a supervisor qualified within that same discipline. Based on CORU's recommendations, from January 2020, LIT SCLs will no longer avail of PEP unless supervised by a qualified SCW. As O'Neill (2004) confirms, the three central tenets of professional supervision are support and learning, coupled with accountability. This compares favourably with Lalor and Share's (2009) idea of a "*Dual focused approach*" interweaving two strands: an operational and a developmental strand. This developmental strand refers to the personal and professional self of the SCL/SCW. It is Joyce, Miehl, DuBois and Garran (2011) who concur that well established supervision, having reached expected outcomes around the middle stages, should be in a position to provide more scope for autonomy in the SCLs/SCWs practice and should result in less teaching. The supervisor has three core roles: that of educator, supporter, and often manager too, dispensing with those duties, where appropriate (Hawkins, McMahon, Ryde, Shohet and Wilmot, 2020; Howe and Gray, (2013). Supervision is acknowledged as contributing to better outcomes for individuals and meeting performance standards (Parker, 2010; Knapman and Morrison, 1999). It is important as Parker (2010) agrees, that SCLs are provided with a supportive and flexible learning environment in which practice is discussed, reflected upon and monitored. Having reviewed literature related to PD in chapter three, I would advocate for practice to be secondary to supporting the SCL/SCW personally. If the SCL/SCW is in good physical and mental health, it is more likely their practice is healthy too. Ward's (1999) "*matching principle*" always remains to the forefront of my mind, if SCWs feel supported by their supervisors, managers and organisation, they are more capable of handling the more challenging aspects of their practise. I contend that this is true of any dyadic relationship such as learner/teacher or researcher/supervisor. It is noticeable in the SCLs returning from their PEP, those who experienced a supportive supervisor had a more rounded and fulfilling PEP experience, whereas, the opposite was generally true for those who rarely had engagement from a supervisor, those SCLs were focussed on completing their hours and leaving. Consequently, learners with supportive supervisors often

returned to volunteer with the organisation. Both the supervisor and the supervisee should come away from each supervision session having contemplated a dilemma, with new thoughts and developments to grow and learn from the encounter and within the space provided to reflect. This requires time for preparation beforehand, and time to consolidate afterwards (Henderson, 2009). As SCLs progress through placement, their practice assessor begins to draw conclusions about their overall performance and competence (O'Connor, 2006).

Joyce et al. (2011) view field supervision as a neglected area, despite the essential role it plays in the professional development of practitioners. They go on to state a growing number of learners concede they lack the knowledge and ability *"to initiate or sustain a relationship with their field supervisor"* (p. 251). Moreover, they believe curriculums often leave learners unprepared for supervision. Another reason why supervision is crucial in supporting learners and staffs' professional development is, according to Davys and Bedoe (2010), that supervision is an activity that relies on skills necessary for *"conscious and intentional use of interventions"* (p.131). It is essential to provide an environment to aid and ensure purposeful and quality reflection and learning can occur. According to Kadushin and Harkness (2002), *"the ultimate aim of supervision is to enable the workers and the agency through the workers, to offer the client the most effective and efficient service"* (p. 217). An important issue to keep in mind when beginning PEP is personal and professional boundaries, in particular confidentiality and other professional ways of behaving within the PEP relationships (Cochrane and Hanley, 1999). Professional boundaries are discussed next.

4.3.4 Professional boundaries

Professional boundaries are a

set of guidelines, expectations and rules which set the ethical and technical standards in the SCW environment. They set limits for safe, acceptable and effective behaviour by workers (Cooper, 2012, p. 11; Moss, 2012; Peterson, 1992).

These limits allow safe contact between SCLs/SCWs and individuals worked with and how professional boundaries can help us to manage ourselves and our emotions. Since professional boundaries between SCW and individual worked with fortify SCW practice, it follows breaching those boundaries can lead to unprofessional practice with undesirable consequences for both SCW and individual worked with.

Dietz and Thompsons' boundaries theory (2004) suggests that boundaries are in place to protect and differentiate between personal and professional needs of individuals worked with; "*Boundaries refer to clear lines of difference that are maintained between the social worker and the client in the effort to preserve the working relationship*" (Hepworth, Rooney, R. H., Rooney, G. D., Strom-Gottfried and Larsen, 2009, p. 66). It is essential to "*always establish clear boundaries, so that each of you knows what is and is not acceptable*" (Moss 2012:119; Banks, 2012). Not only is this critical for effective SCW practice but also for PDGs. This is important because inappropriate relationships contaminate professionalism. Professional boundaries are the cornerstone of SCW and dealing with boundaries is a constant process of awareness (Payne, 2005). Maintaining professional boundaries with individuals relies on knowing where it is appropriate to delineate the boundary whilst building and sustaining robust, trusting relationships with individuals encountered in practice; the caveat is that whilst building these relationships "*professional detachment*" from the individuals worked with is essential (Cooper, 2012, p. 13). It is a difficult task to navigate, being friendly but not a friend is a very precarious place to navigate. Maintaining boundaries is not only for the protection of others but also for the SCW themselves. PDG is the ideal place to explore and maintain these boundaries and also for facilitators to model correct demarcation of boundaries for learners with the expectation that maintaining appropriate boundaries will manifest within the learners' own practice. Maintaining boundaries requires a proficiency in assertiveness and confidence to maintain healthy professional relationships and not contaminate professionalism (Philips, 2013). Scott (2013) realises overtime, boundaries have become blurred; SCWs often struggle to keep their professional and personal lives separated during the course of carrying out their duties. Cooper (2012) outlines the ease with which SCWs can cross the boundaries at work without recognising this breach. This is particularly true if the work brings up memories or feelings not already dealt with. Thus the importance of PDGs, RP and self-awareness to recognise the possible breach and to restore and maintain these boundaries. Assertiveness is also a prerequisite not only to convey to individuals worked with where the boundary line is and to also recover from a breach of boundaries and reset the boundaries (McBride, 2007; Philips, 2013). RP, self-awareness and assertiveness were discussed in chapter three under section 3.6. The focus of this next section is on the educational theories applicable to both PD and or PEP.

4.4 Educational Theories Applicable to PD Learning and PEP

There are a number of educational theories applicable to both PD and or PEP. It is not the remit of this thesis to offer an extensive mapping of these theories to PD and PEP, as the intention is to show how four of these theories, namely humanistic, Scl, threshold concepts and transformative theories, could be applied to PD and PEP. Moreover, the intention is to provide more insight into the PD and PEP modules. As mentioned earlier in chapter two, much of the recent worldwide education policies and ideologies are more focused on economics than on the earliest educational thinking, namely that education's primary role was for learners to personally develop and grow, having had a fulfilling educational experience (Loxley, Seery and Walsh 2014; Barros, 2012). One way to facilitate a fulfilling educational experience is to engage with student centred learning (Scl). Scl is the focus of this next section.

4.4.1 Student-centered learning and teaching

Hoidn and Klemenčič (2021) broadly define Scl as an *“umbrella term of a variety of pedagogical concepts, approaches, techniques wherein students and their learning are placed at the heart of the educational process”* (p. 3). Student centered approaches, endorsed by Hannafin et al. (1997, p. 94), reside in a *“constructivist epistemology: knowledge and context are inextricably connected”*. That is to say, this pedagogical theory suggests that in practice learners construct their understanding through their actions and experiences of the world. Individuals alone determine the meaning through the experiential nature of the learning, authentic problems are resolved, indicating understanding was gained from both the knowledge and context of the learning moment (Huhtinen-Hildén and Pitt, 2018; McCabe and O'Connor, 2014). Gaining understanding in this way will allow deeper learning processes to evolve whereby learners can become more self-directed, and lifelong learners. Furthermore, this meaning making is also in response to previous knowledge and thinking. Scl has much in common with the social constructivist view, a background theme running through this thesis, which emphasises activity and the importance of communities of practice/others in the learning process, which aligns well with PD and PEP (Hoidn and Klemenčič, 2021). The learning occurs as a result of been immersed in a community of practice. For PD, the community of practice are the group members, while for PEP the community of practice extends to, not only the professionals in the host organisations, but the individuals encountered as part of the PEP. Scl has been

defined by numerous authors to a dizzying amount of diverse and sometimes contradictory definitions (Paris and Combs, 2006; Hoidn and Klemenčič, 2021).

It appears from the literature that some view Scl as a concept whereby learners have a choice in their education. Others see it as being more concerned with the learner doing more than the teacher (active versus passive learning). Others have a much broader definition which includes both of these concepts, describing the shift in the power relationship between the learner and the teacher (O'Neil and McMahon, 2005). The broader definitions share commonalities with PDG learning. During PDG, it is possible at times to recede into the background whilst still being present physically and emotionally to the learners, whereby, the learners feel that they are steering the group in a direction of their choosing and to the onlooker it may seem the group/certain group members have the power but in reality it is possible, at any time, to redirect the groups attention and redistribute the power equally again. This provides the opportunity for group members to learn from their peers. While learners do not have, in the strictest sense of the word, a choice in their education, their choice lies in what they want to bring to the PD learning process, usually but not necessarily within the confines of the semester's topics. For illustration purposes, if group members have something pressing to bring to group we can digress from, let us say family, provided it is not an avoidance or defence mechanism. It is quite possible there will be an element of family in what the group member wants to bring to the group. Sometimes a learner has met with a distressing experience since we last met and it can be mentioned during or after check-in. In essence, if appropriate and in the best interest of all the group members, topics can be introduced by group members. This is where, I believe, the deepest learning occurs when topics raised by learners are teased out and thought about by group members. Yet, I am conscious of McWilliam's (2009) disquiet around the possibility of Scl becoming an excuse, particularly for facilitators to become passive teachers. This concern can be dispelled throughout the remainder of this section when student centered learning (Scl) is elaborated on further.

The following characteristics of Scl that match PD learners are outlined by Lea, Stephenson and Troy (2003, p. 322).

- *Reliance on active rather than passive learning*; all ten learners are switched on, with an *Emphasis on deep learning and understanding*; every learner is

learning from the learner that is speaking and making sense of what they are hearing based on their own experiences, values, norms and societal norms.

- *Increased responsibility and accountability on the part of the learner*; it is every learners responsibility to check in with themselves and know what is safe for them to say or disclose. Learners also have a responsibility to interact respectfully and they have an unspoken responsibility to be supportive to fellow learners. Accountability amounts to keeping the rules of the group contract, such as confidentiality, turning up on time and contributing as much as possible on any given day.
- *An increased sense of autonomy in the learner*; the PD learner has almost complete autonomy on what they discuss and learn each week in group. This learning may arise from check-in. It is worth noting, the needs of the group are more important than what the facilitator has planned for the group, which is in contrast to the planned lectures that are delivered.
- *Interdependence between teacher and learner*; this is observable throughout the group process. The facilitator relies on the group to trust that their facilitator can “hold” whatever the learners bring to group, that their facilitator knows what they are doing and will keep them safe within the confines of group. Otherwise, it will be a very superficial group process. The learners rely on the facilitator to be all of the above and to be present and emotionally available to them. As Woolfe (1992) confirms, this teaching environment requires the facilitator not to be emotionally separate from the experience. Without the learners’ contributions and engagement, learning moments would be substantially reduced. This interdependence is at the core of the reciprocal nature of the PD learner/facilitator relationship.
- *Mutual respect within the learner teacher relationship*; This is achievable in PDG when learners are aware of their role and the facilitators role in PD and when the group contract has been devised and signed. Interviewing PDG members individually before PDG begins allows group members to discuss areas of concern relating to their participation in PDG. Velleman and Aris (2009) discuss mutual respect in their work. “*One person pushing another can be a valuable aid to their development when there is mutual respect*” (p.264) PDG is a moment in time where deep respect is experienced; facilitator for the learners and the learners for the facilitator.

- *A reflexive approach to the teaching and learning process on the part of both teacher and learner*; this reflexivity is encouraged at numerous points during the PDG session, during check-in, after check-in, and space is provided for the learners to raise anything left over from the previous group that they are still processing. Finally, check-out is also a space to raise any unfinished business or something overlooked during the course of the session or previous sessions.

Whilst the tenets of Scl, mentioned thus far, mirror the PDG learning, this is somewhat in contradiction to how Biggs (cited in Lea et al., 2003) describes the Scl approach. He includes the principle that learners should be consulted about the learning and teaching processes. While PD learners are not necessarily consulted about the learning and teaching process for PDG, most aspects of PD teaching and learning emerge organically based on the learners' input to the learning material of each PDG, which seems to meet the overall principles of Scl. The main focus is on the PD learners' needs as a group and then more specifically the needs of each learner are considered including what they consciously and unconsciously require from their facilitator and the other group members in order to progress their engagement and learning within PDG.

It is Paris and Combs (2006) who succinctly describe the Scl approach taken during PD : *“teaching that simultaneously incorporates student voice and choice and focuses on meeting content standards”* (p. 572). Carlile and Jordan (2009) accurately and poetically describe the Scl approach most suited to PD when they agree that *“the teacher is not just a ‘facilitator of learning,’ she is more like an orchestral conductor who knows both the nature of the music and the styles and abilities of the performers”* (p. 8). This is an apt way to describe the humanistic approaches adopted with the PD learners and has characteristics of the work of Winnicott (1960, 1965, 1985); Dockar-Drysdale (1965,1990,1993); Bowlby (1969, 1980) and Bion (1961), as outlined in chapter two and chapter three. PD learning can prove problematic and challenging, with most learners wandering into an undetermined area of new knowledge, concepts, or skills. This area can be felt as uncomfortable, stressful, and or unstable as the learner negotiates their way between previous held understandings and emerging new understandings, particularly if those emerging understandings are in conflict with or contradictory to those previous held understandings (Cousin, 2008).

Learners come to PD with varying dimensions of experiences and learning (not just educational learning, but social, cognitive, and behavioural learning). It is their reactions and actions to not only their own but to the experiences and learning of others where real learning most likely occurs. All of the above can strengthen learner motivation, and promote peer communication once the facilitator accommodates learners where they are at and adopt appropriate teaching strategies. These strategies should accommodate learners' needs, not only in a PD context, but in the wider discipline of SCW teaching. This view has much in common with Keeton and Tate's (1978) definition of

learning in which the learner is directly in touch with the realities being studied. It is contrasted with the learner who only reads about, hears about, talks about, or writes about these realities but never comes into contact with them as part of the learning process (p. 2).

Humanistic educational theories are the focus of this next section primarily because PD is interested in the whole person developing within the PD learning process.

4.4.2 Humanistic educational theories

Humanistic educational theories are mostly concerned with the development of the whole person. The overarching aims of humanistic educational theories are to inspire, empower, and champion learners to be open-minded and motivated to learn. These educational theories are interconnected with transformational education theories and the work of Mezirow and others examined in the subsequent section. To begin, aspects of Maslow's and Rogers work will be examined to see its connectedness to, and applicability to, PD and PEP. This section concludes with a more in-depth look at Rogers educational theories and their relevance to PD.

Maslow and Rogers self-actualisation

We could not discuss humanistic theories of education without first mentioning Maslow, the reputed father of humanistic theories and one of the SCLs favourite and appropriate theorists. Maslow (1954) maintained that growth needs could not be achieved until an individual's personal basic or deficient needs were met first. This growth was equated to self-actualisation and, to achieve this, one had to be well on the way to having climbed Maslow's pyramid. A robust foundation was required, as the further one climbed this pyramid, the shakier the ground became. In the role of

facilitator, it is important to ensure the foundation becomes firm through advocating predictability, fairness, stability, and ensuring all of Rogers (1961) traits of the person centred approach are also adopted. While Maslow's (1943,1954) term self-actualisation has been contested by others, including Rogers, he was instrumental in promoting the notion of the whole person, taking into account all the elements necessary to thrive and develop as a healthy psychologically and physiological person.

Rogers (1951) relied on empirical evidence from his own research to define self-actualisation and found that his focus was best placed on examining the characteristics of the fully functioning person and the obstacles to self-actualisation and how he could support the individual to reach self-actualisation; something which is inherent in the role of the PD facilitator. What is encouraging, and both Maslow (1954) and Rogers (1951) agree, is that gaining acceptance exceeds the need for gaining self-actualisation. Again, within the right atmosphere, PD learners will feel acceptance which can be powerful, most especially, if they have not felt acceptance before in other educational or life experiences; and it is particularly more poignant if they have not previously believed such acceptance is deserved. In addition to acceptance, safety and belonging needs are endeavoured to be met, also mirroring Maslow's (1954) work, where individuals were at the centre of his work. To reach self-actualisation, the learners should be suitably or appropriately challenged within the learning experience to feel worthy of self-worth and accomplishment. Maslow (1954) intends this style of learning to only be attainable outside of formal education. Yet, his theory is applicable to PD and PEP; learners' talents, capabilities and potential are channelled in PEP and PD learning rather than waiting to be free of formal education.

Maslow and Rogers sought to understand the positive elements of human behaviour. When one purposely seeks to find positive behaviours in a person's presentation, the negative behaviours cease to be all consuming and begin to decrease. This view is supported by Thorne (1992) who

affirms that the whole conceptual framework of Carl Rogers rests on his profound experience that human beings become increasingly trustworthy once they feel at a deep level that their subjective experience is both respected and progressively understood (p. 26)

Rogers

Rogers (1957,1959,1961) examines the whole person in humanness with all the possibilities that it entails and streamlines it in to his work on person-centred therapeutic approaches. Much of Rogers work advocates that the individual is the expert in their own treatment, thus aiding self-healing and growth with the therapist or facilitator. His theories are adopted in educational circles and is visible within the realm of PD, whereby learners proceed through PD at their own pace and make their own self-discoveries along the journey. Rogers (1959) firmly believes in an individual's innate propensity to build on their inherited attributes to enhance their self. That is why PD learning is individual, as not everyone inherits the same attributes, nor do they develop or grow at the same pace as others. The human, according to Rogers (1959, 1961, 1980) constantly seeks autonomy, first from caregivers as they are developing a sense of self from their infancy, then from educators, and so forth. It appears that when learners are going through PD they acquire tools, strategies, and skills to continue their PD journey alone and try it out in both their personal and professional life.

In a growth promoting environment such as PD, Rogers (1986, p. 128) understands the capacity of the individual to migrate towards "*self-understanding and self-direction*" in a way that optimises their potential. Conversely, unfavourable environments stunts growth and striving for actualisation. Rogers (1959) claims individuals instinctively know what is and is not in their best interest, succinctly termed "*organismic valuing*" (p. 196). This would suggest the healthy PD learner is the driver of what to convey or disclose, how much to convey or disclose, and when to convey or disclose within PD. Rogers (1977) understands that individuals have the capability to evaluate both "*the outer and inner situation, understanding herself in its context, making constructive choices as to the next steps in life, and acting on those choices*" (p. 15). A PD learner who may be struggling with PD may warrant the facilitator teasing this out with them and helping them arrive at a place where they can attune to their inner voices, become aware of their defences or inaccurate self-concept. This aids PDG members to be open to new experiences and to live more authentically. Rogers (1957, 1961) advanced "*organismic valuing*" and unearthed the term "*positive regard*" and "*positive self-regard*". Positive regard includes displaying behaviours such as love, affection, and nurture, while positive self-regard is experienced when the individual experiences

positive regard, resulting in that individual then experiencing improved self-esteem and self-worth; all key ingredients for the realisation of self-actualisation. Good enough caregiving, a Winnicottian (1965) term, lays the foundations for positive self-regard to be fostered at, ideally, an early age otherwise any age is preferable to it not being fostered at all. Many of the individuals worked with and our learners have not had those affirming experiences and are starting from a point of having the exact opposite to positive self-regard. In fact, often viewing themselves as unworthy and unlovable and exhibiting all the behaviours to mask those feelings with the aim of proving themselves right. These behaviours are similar to the self-fulfilling prophecy a term coined by Merton (1948). In Rogers (1957) opinion, a threat to the development of the self occurs in those who have experienced the opposite to positive self-regard. It is Dockar Drysdale (1990) who takes this a step further and expresses a way must be found for the person to keep the good inside them, otherwise all the good work is lost once the work ceases. This is the aspiration for our SCLs as they embark on their professional practice as SCWs.

For that reason alone, PD can ameliorate some of those feelings mentioned above by ensuring each learner is met with positive regard. Furthermore, Rogers (1951, p. 501) expands on this notion when he argues the individual, who distorts and denies who they are and subsumes an introjected sense of who they think they should be (ideal self), their “*self-concept*” becomes a disconnected part of the person. The opposite is observable when the individual experiences positive regard for their “*real self*”, the person they were supposed to become, is likely to develop. This self becomes the “*ideal self*” and is characterised as being more closely aligned with the “*real self*”. PD provides numerous opportunities to test this out and some may discover the “*real self*” is the “*ideal self*”. The greater the disparity between the ideal and real self is, the more incongruity exists, posing problems throughout life. If engaging in PD assists learners close the gap on the magnitude of this incongruity, then that PD process has been beneficial, not only to the learner in the present, but also for their future wellbeing and happiness. Rogers, as do I, was firmly committed to the development of a healthy person or in Rogers (1965) words “*the fully functioning person*” (p.21). I disregard “*fully functioning*” as a term that no-one can live up to at all times not to mention the felt pressure to live up to “*fully functioning*”. The term well-functioning is not as unattainable as “*fully functioning*”. PD does not claim learners will be “*fully functioning*” selves at the end of PD. Nevertheless, if PD guides learners on a path of self-discovery

whereby they can aim for a version of functioning, knowing they have been heard and had an opportunity to explore their self and arrive at deductions and conclusions that narrow the gap between “*real self*” and “*ideal self*”, then, that in itself is not only advantageous to that person but also, I would suggest, for the individuals encountered and worked with in practice. Rogers (1959) notes how a psychologically healthy person is fortuitous to have resided within such circumstances as to have stimulated the emergence of self-concepts which were mostly in sync with their deepest experiences and feelings. PDG sessions offer and provide the stimulation whereby self-concepts can be explored and synchronised with the learners’ deepest experiences and feelings. Baumeister (2013) supports this when he explains that developing self-confidence relies on the person accepting themselves for who they are whilst constantly striving to improve their capabilities and surmounting their limitations.

The five attributes Rogers (1961) lists to be compatible with becoming a “*fully functioning*” person, or what I term a well-functioning person, are: Openness to experience, Existential living, Organismic trusting, Experiential freedom and Creativity.

- *openness to experience* encompassing that, sometimes rare ability for learners, to not only listen to their own self but to listen to others also, including, the ability to experience what is in the room in a non-threatening way. It seems once PD learners become open and engaging with PD, they begin to take from PD that which is most useful to them. Thus organismic valuing becomes apparent.
- *existential living*, concerns living in the now, being present and unafraid of each lived moment and what it might bring. Contemplative pedagogies from PD, such as meditation, grounding and mindfulness exercises, bring PD learners in to that present moment space. The SCW programme and SCW practice can be particularly stressful. The space is provided within PDG to come in to the present moment through contemplative pedagogies and practices. Additionally equipping learners to incorporate contemplation as a component of self-care, I believe, will assist with elements of the work that lead to burnout and is another strength of PD, since learners can engage in as much or as little of the contemplative exercises as they wish, similar to self-care.

- *Organismic trusting*, is trusting one's own judgement as a valid source of information without the need to rely on others for that information. PD is a place where everyone's contribution is valued in a non-judgmental manner. This place provides the space and time for learners to tune into their own self and test out their own judgements in group and when those judgements are valid and valued, this builds confidence for their future practice. This organismic trusting, gained in PD, is a tool to recognise any black and white policies that are incongruent to the needs of the individual worked with. RP pays a large part in coming to make a judgement and then accepting that judgement as valid and of value to those worked with.
- *Experiential freedom* is connected to the previous attribute, as it involves being accountable and taking responsibility and the consequences for any judgements acted upon. It would seem the more PD learners close the gap between real self and ideal self, the more they can stand up and assume responsibility and accountability. As mentioned earlier, PDG is set up to provide the conditions necessary to diminish the gap, slowly, between real self and ideal self, which I would argue is conducive to learners gaining experiential freedom.
- The final and fifth attribute is concerned with *creativity*, not necessarily in the artistic sense. This style of creativity is more in line with the freedom and capability to adjust or adapt, through creative means, either ideas or interventions to circumvent unexpected changes or challenges on the programme or later in practice. PD by its very nature asks learners to think creatively about self and their self's place in the world during PD. Numerous creative activities are introduced throughout the four years of PD. SCW by its nature is unpredictable and requires constant creative reframing of how the day should proceed rather than how it is expected to unfold. SCW's unable to think quickly and creatively under pressure will, I believe, succumb to burnout quicker than the SCW who expects the unexpected and is tolerant of change.

Much of Rogers' theorising is as a direct result of working with individuals but it is adaptable to PDG processes, whereby group members adapt the learning from PDG to their respective practices. Congruence, empathy, and respect are the three named behaviours Rogers considered necessary to work therapeutically with others. This is conveyed by both facilitators and PD learners and its importance is that it is modelled

by facilitators for learners in a way they can adopt to their practice. In summary of Rogers relevance to PD, his focus on the therapeutic relationship of authenticity is key to his work, as is unconditional positive regard and empathy, which is modelled in PD and hopefully transferred by the SCL to their practice. The development of the self is instrumental to Rogers theories of development. These Rogerian (1961) theories of development are particularly relevant to PD when he states “*a fully functioning person ... has this underlying confidence in themselves as trustworthy instruments for encountering life*” (p. 195). PD facilitators can nurture the growth of underlying confidence whereby PD learners view themselves “*as trustworthy instruments for encountering life*” as well-functioning (“*fully functioning*”) individuals. This underlying confidence bodes well not only for personal life but professional life too. Being “*trustworthy instruments for encountering life*” could somewhat reduce SCW’s susceptibility to burnout. Educators have a responsibility to provide the conditions that encourage learners to tap into this underlying confidence.

Rogers (1951, p. 389) theory of education, which has been heavily criticised, is applicable to PD; the idea is the teacher as facilitator and the learner activating their own learning. Rogers theories of education are applicable to PD due to his advocating for communities of learners, whereby information is shared in a non-competitive manner, thus allowing the development of positive “*self-concept* and “*positive regard*” to be available to all group members. Rogers detractors believe this type of education is unlikely due to possible curriculum and assessment limitations. However, as evidenced through the PD chapter and this chapter, there is sufficient latitude within the PD curriculum, LOs, and assessment procedures to achieve the type of learning Rogers (1983) promotes, as opposed to being educated in a manner he called “*educated from the neck up*” (p. 4).

Rogers (1951, 1983) concurs that the learning from his ideal education techniques are more easily retained by learners, particularly, if the learning involves feelings or personal meanings. If not, it has no relevance for the whole person. He also notes that learners become rigid when they feel self is under threat, which then restricts their learning; this is observable at the outset of the early stages PDG sessions. This can be minimised when learners are made as comfortable as possible and their perceptions and experiences are welcomed and valued. In addition, learners’ earliest attempts to engage with PD should be acknowledged in a way that is commensurate

with their engagement. Additionally, any transformational learning gained as a result of the learners' engagement with PD should also be acknowledged either verbally as it transpires or in written feedback on their assessments. Transformative learning theories are the focus of the next section.

4.4.3 Transformative learning theories

Experiential Learning Theory resonates with transformative learning; *"the process whereby knowledge is created through the transformation of experience. Knowledge results from the combination of grasping and transforming experience"* (Kolb, 1984, p. 41). Woolfe (1992) contend experiential learning consists of the following four components:

1. The learner is aware of the processes which are taking place, and which are enabling learning to occur.
2. The learner is involved in a reflective experience which enables them to relate current learning to past, present, and future, even if these relationships are felt rather than thought.
3. The experience and content are personally significant: what is being learned and how it is being learned have a special importance for the person.
4. There is an involvement of the whole self: body, thoughts, feelings, and actions, not just of the mind; in other words, the learner is engaged as a whole person (p. 1).

The last three components align quite well with PD learning, however, it is likely that component one can occur when the learner is unaware of the processes taking place, yet, transformative learning is still occurring. Van Lier (1996) disagrees when he suggests to *"learn something new one must first notice it. This noticing is an awareness of its existence, obtained and enhanced by paying attention to it"* (p. 11). Whilst possibly true, in many circumstances, it does not equate to the only manner through which PD learners learn. Much of PD learning occurs through reflection, reflective writing/journals and examining others' contributions to PD. Woolfe's (1992) summary of concrete propositions concerning the nature and application of experiential learning equates with PD learning. This occurs when he notes experiential learning relates to the learners' experiences. Their own experiences are key for self-understanding; they are active participants and power shifts in their favour with the

“*expert*” facilitator activating a process of learning within the learner. Furthermore, responsibility for learning rests with the learner, and the “*expert*” acts as a resource and provider of structure but learning is seen as taking place when the learner is actively trying to assimilate external knowledge into their own internal frame of reference. RP must always be encouraged. This brings us back full circle to effective group facilitation in chapter three. This is mainly due to Woolfe (1992) signifying the importance of the learning milieu. The PD facilitator is responsible for ensuring the milieu/environment is conducive to learning from experience and the holistic participation of the learner. Just as important, the facilitator should be capable of handing control over to the PD learners and dispersing that control to each PD learner as required. Finally, in order for further learning to occur RP must be promoted during and after PDG. This idea resides with Mezirow’s (2000) views of learning.

Transformative learning theories are synonymous with Mezirow, which he described as having a “*constructivist*” alignment to the manner in which learners interpret, reinterpret, and communicate their sense of experiences applicable to creating meaning and consequently the learning that follows (Mezirow, 1994, p. 222). Tomlinson-Clark and Clark (2016, p. 40) define transformational learning as learning that induces far reaching change in the learner, different to other types of learning experiences, which shape the learner and produce a significant impact, or paradigm shift, which then affects the learners’ subsequent experiences. Theories of transformative learning share commonalities with Rogers’ humanistic and humanistic educational theories examined in the previous section, as well as Threshold concepts which will be addressed later in the next section.

This next sub-section will predominately focus on the work of Mezirow with particular reference made to the transformation of the self within PDG learning. There will also be fleeting reference made to Woolfe, Freire, Cranton, Taylor and Cranton, Boyd, Knowles, Rogers and Consedine and Magai in the transformative learning arena. Problem based learning (PBL) will also be considered for its transforming abilities and will conclude this section.

Mezirow

Mezirow (2000) believes “*Learning is understood as the process of using prior interpretation to construct a new or revised interpretation of the meaning of one’s*

experience as a guide to future action" (p. 5). Later, Cranton (2016) agreed that transformative learning occurs when learning results from transforming problematic *"frames of reference"*, with a view to making them more *"inclusive, discriminating, reflective, open and emotionally able to change"* (p. 27). This process happens within the confines of the PDG with the support and communication from group members. Mezirow's (1991, p. 13) term *"disorienting dilemma"* are dilemmas outside the learners' world view and can be teased out with PDG members. The learning derived from this process is often transformational on numerous different levels for each PD learner. Mezirow's (1997) transformative learning theory, inspired by social constructivism, promotes that learning necessitates a change in consciousness, referred to as a *"perspective transformation"*, which involves the resolution of a *"disorientating dilemma"* (Mezirow, 1991, p. 185). A key element of the process of *"perspective transformation"* includes critical reflection, a topic covered in chapter three. Both PD and PEP learning align with Cranton's (2016) transformative learning definition, which states that transformative learning *"is a process of examining, questioning, validating and revising our perspectives"* (p. 23). Mezirow (1978, p.101) noticed, *"we are caught in our own histories"* and I believe that it is through examining, questioning, validating and revising our perspectives in PD and PEP that transformative learning takes place. Mezirow's (1994) views, in many instances, compare directly with PD learning and its outcomes, and has much in common with Rogers (1959) organismic valuing ideas, particularly when Mezirow contends that transformative learning

is a process by which we attempt to justify our beliefs, either by rationally examining assumptions, often in response to intuitively becoming aware that something is wrong with the result of our thought, or challenging its validity through discourse with others of differing viewpoints and arriving at the best informed judgment (p.46).

Frequently, these changes come about when understanding of the self and power relations are examined, along with concepts of race, gender, class, and social justice. Mezirow (1994) goes on to assert that transformative learning provides the possibility for learners to gain new ways of interacting personally, professionally and in society. This also builds on the learners' capacity for acceptance, tolerance, compassion and understanding. These capacities are often due to RP being incorporated.

Freire (1970) confirms RP is vital to action, and without action, there is no transformation. In other words, RP is key to transformative learning moments once

this RP leads to action. Yet, Mezirow has his critics. One such critic was Kitchenham (2008), who contested the transformative learning concept as “*being complex and multi-faceted*”. This corresponds to how PD could be depicted, which is why RP is key to the process of PD. Mezirow (1991) indicates only the process of transformation can be evaluated and not the product which differs to the evaluation of PD learning. Within this thesis and PD learning both the process and the product are evaluated. This may be true for the contexts Mezirow was interested in, but as far as PD is concerned, it would seem that transformation within PD learning can be evaluated during the facilitation and assessment of PDG members during their time attending PDG, the product is evaluated as part of this research. As Taylor and Cranton (2012) concur, “*it is not what they do or say but, how it is done and said that gives an indicator of transformative learning*”(p. 523). To evaluate transformative learning, they agree that self-reporting in the form of journals, diaries, and other written sources are adequate, as is self-evaluation and interviews. Evaluating transformative learning mirrors the research methods for this thesis.

Learners take a central position in the PD learning process, in a way Knowles (1950) would have approved of, as their learning is also an individual internal process. This facilitates learner discovery, peer learning and group work rather than “*educating people*”, the PD process “*helps them learn*” (p. 6). There is no greater privilege, satisfaction, or joy as a teacher than bearing witness to and facilitating learner discovery and transformation; to see emancipation from thoughts, feelings, and experiences that were stifling their PD. It allows the learners to move closer to being what Rogers (1961) terms as fully functioning as possible, with a better understanding of their own self and the self of others. Yet, much of the transformative learning literature, particularly critical reflection and cognitive development aspects often overlook some of the personal growth and PD transformations that occur as a result of engaging in PD and PEP learning (Fook, 2010; Boyd, 1991). Boyd (1991), argued that the emotional aspect, as opposed to the rational aspect, of transformational experience was the dominant force for change. Interestingly, he also believed the most anticipated outcome of transformational learning was greater independence and compassionate relationships with others. Perhaps in order to have more compassionate relationships with others, one should first begin that process with the self. Much of PD or growth is around gaining emotional maturity. This emotional maturity is endorsed by the work of Consedine and Magai (2006), who link emotional

maturity with a number of elements, resulting in advanced cognitive functioning. These elements include a tendency to reflect, be creative, articulate, and problem solve, looking at numerous perspectives. This is also consistent with problem based learning (PBL), the focus of this next subsection.

Problem Based Learning

Learners are capable of carving out life-long learning goals, which can further enhance motivation in the group. Learners are more likely to learn more from their peers than their facilitator during the PDG process. PD, often referred to as experiential learning, could be seen to have elements of PBL, through the use of problems/issues/triggers brought by group members to their PDG, thus encouraging the learners to develop their own learning goals and fill in gaps in their knowledge or understanding (Barrett, 2017; Boud and Feletti, 1997). A defining characteristic of PBL is a focus on learners' learning rather than on teachers' teaching (Barrett, 2017, p. 7). This is consistent with the ethos of PD. Barrett (2017) proceeds to incorporate Freire's (1970) belief that: "*in problem posing education people develop their power to perceive critically the way they exist in the world with which they find themselves*" (p. 83). This "*problem posing education*" is apt for the process of PD learning. And while PBL advocates presenting the problem prior to curriculum inputs, PD learners are aware of the "*problem*" of self from the outset of PD, also "*problems*" can and often arise from PD check-in. Check-in denotes the group is beginning and everyone is invited to check-in, firstly with themselves to notice what is happening for them in the moment and then share that information with the group. PD somewhat meets the four key characteristics of PBL, as outlined by Barrett (2017, p. 2). The problem (firstly) which is, (secondly) discussed in the PBL tutorial (PDG) with PD assessments (meeting the requirements of the PBL tutorial with the (thirdly) PBL process occurring when learners bring a topic to the group and discuss it verbally and through their Journal and then written assignments describe their (fourth) learning. PBL seems to also align somewhat with Knowles' andragogical (the art and science of helping adults learn) influences, since learners are at the centre of PBL and andragogy. PBL and andragogy are designed to meet learners' needs which is the focus of this next sub-section.

Meeting SCLs needs

Whilst the LOs are intrinsic to the PD curriculum, they are sufficiently diverse so as not to stifle PD learning and facilitate learners to incorporate their own cultural capital in to their learning; this is what allows PD to have transformative learning and value (Partington, 2021). As Shulman (2005) asserts,

the presence of emotion, even a modicum of passion, is quite striking-as is its absence in other settings. I would say that without a certain amount of anxiety and risk, there's a limit to how much learning occurs. One must have something at stake. No emotional investment, no intellectual or formational yield (p. 22).

PEP and PD align well with what Shulman (2005) terms "*pedagogies of uncertainty*" (p.18). Barnett (2007) validates this point when he endorses Shulman's views by asserting the learner is expected to delve into unknown territories, regardless of how strange or "*anxiety provoking*" they may be (p. 147). Without anxiety, the sense of attending a HEI is negligible. SCW is laden with realms of uncertainty, and as such, no curriculum could predict and provide for every eventuality. Thus, Barnett (2007) contends, as do I, that there is an irrationality and self-defeatist approach to creating curriculums of rigid certainty rather than preparing learners for the uncertainty of SCW practice through encountering uncertainty in both PD and PEP.

Learner expectations, according to Hyde and Edwards (2013) and Prosser and Trigwell (2002), highlight different belief systems between teachers and learners, with learners required to also change their views on learning. Different belief systems have been an invaluable source of learning in the PDGs and PD learners' views and attitudes are varied and I would argue that this is one of the few modules whereby learners' divergent views and attitudes are welcomed and valued. These views and attitudes are not moulded to suit the ethos of the module. Often the learner is learning unbeknownst to themselves and only discover after a period of time that they were indeed learning and not just engaging in conversations, contemplation pedagogies or creative activities, thus bringing about transformation in various aspects of their lives.

In contrast to the SoP for SCW educators, attachment theorists and all those previously mentioned in chapter two and chapter three, contend the quality of our human relationships are the most influential elements of profitable conditions for the education and treatment of wounded or troubled individuals. And whilst not all HEI learners are wounded or troubled, a significant number of SCLs are troubled, as it is well known that the social professions attract learners with personal knowledge and

experiences of adverse childhood/life experiences themselves. Engaging in PD, as mentioned previously, is a courageous endeavour, with the potential for learners to use their felt experiences of “*woundedness*” in their work in a boundaried and self-aware manner. This “*woundedness*” allows a more authentic therapeutic relationships to be co-created, allowing all the elements of person centred practice to be inherent in the work. Some of that felt “*woundedness*” can stem from educational disadvantage occurring because the school system is portrayed as being open to all people. However, Reay (2006) found some working class learners view themselves as being intellectually inferior as opposed to considering that it is the system that is most likely to blame for their perceived failure. Giddens and Sutton (2017) hold similar views to Reay. I raise this issue of educational disadvantage, as many of our SCLs have been educationally disadvantaged and have come to SCW learning as second chance education learners. Thus, they carry all the hurts and feelings of “*not good enough*” and feeling incapable of succeeding in HEI. Having an opportunity to explore these ingrained feelings and experiences in PD is, in my view, advantageous to both the learner and LIT and posit this may be why attrition rates for the SCW programme are exceedingly low. Thomas (2012) concurs when she states “*high-quality student centred learning and teaching must be a primary focus for effective student retention and success*” (p.6). According to Bourdieu (1979) and Giddens and Sutton (2017), “*schools systematically advantage those who have already acquired cultural capital in their family and through the social networks which it is embedded*” (p. 827). LIT has a reputation for their intake of learners from socio-economic disadvantaged areas, where cultural capital has yet to be identified, with many of the graduates being first generation graduates (Nichols, 2020; Halsey, Lauder, Brown and Wells, 2001). Not only does this elevate them from the disadvantages from which they entered tertiary education but future generations will now begin their education with cultural capital. McGrath (2010) contends “*Relationships and particular forms of interaction are key mechanisms through which cultures of learning and social inclusion can be inculcated*” (p. 611). Some of the LIT SCLs may not have completed their second level education and for those that have, it was not always a positive experience. Other SCLs are non-national learners and come to SCL with a multitude of difficult experiences. Furthermore, young people SCWs encounter in their work are often struggling with the rigid structure of the school setting which can be unsuitable for some learners. These learners can thrive with a person-centred/Scl approach to teaching. As the Inspectorate Evaluation Studies (2010) states: “*Learners who engaged fully with their*

programme were seen to have positive learning experiences, improved self-esteem and self-worth and enhanced personal and social development" (p. v). Kolb (1984) stated "*Learning is the process whereby knowledge is created through the transformation of experience*" (p.38). This is true in the educational sense but also within the psychosocial realm of SCW too. As Freire (1970) asserts "*knowledge evolves only through ... restless, impatient, continuing, hopeful enquiry*" (p.72)". The evolving knowledge discovered in PD is discovered in relationship with the self and others and examining experiences from various different perspectives. This requires learners to leave their comfort zones and face the unknown. Facing the unknown is a characteristic of Threshold Concepts (TC), the focus of this final sub-section.

4.4.4 Threshold concepts

Schwartzman (2010) confirms "*Real learning*" occurs when learners leave their comfort zones, which culminates in "*a rupture in knowing...*"(p. 38). This "*Real learning*" is observable time and time again when PD and PEP learners step out of their comfort zones and release their grip on views they held but not in a systematic thought about way. A systematic thought about way can be judgemental and suggest that views held are not valid. Whereas, the manner in which PD learning and PEP encourage examining views held, is at the pace of the learner but also dependent on the learner raising, examining and reframing their views. Schwartzman (2010) proceeds to clarify that all threshold concepts (TC) scholarship is concerned (directly or indirectly) with encountering the unknown. In other words as Meyer and Land (2006) explain TC are "*akin to a portal, opening up a new and previously inaccessible way of thinking... a threshold concept may also involve a performance element*" (p. 3). TC theory offers clarity and direction in addressing related issues of training and education. TC theory sheds light on the important parallel between the educators praxis and the development of learners practice. This parallel is a key and, generally, unacknowledged element of curricular development and delivery (Steckley, 2020). The significance of this parallel is accomplished between PD facilitator and PD learner.

TC are defined by Meyer and Land (2003) as having five characteristics: they are

1. Transformative in enabling new ways of thinking and understanding
2. Irreversible in that, once grasped, they become impossible to forget or unlearn

3. Integrative in their ability to make visible relationships between ideas or phenomena
4. They help to demarcate disciplinary or subject boundaries and thus are characterised as bounded
5. They can be difficult to grasp, counterintuitive, tacit or challenging to pre-existing ways of understanding and therefore troublesome (p. 5-6).

All of the above are wholly applicable to PD and PEP, in particular, the fifth characteristic, as both PEP learners and PD learners could relate to the difficulties outlined in this characteristic. As stated by Land (slide 17) during his keynote address at LIT (2018), *“the engagement by the learner with an unfamiliar knowledge terrain and the ensuing reconceptualisation may involve a reconstitution of, or shift within the learners’ subjectivity, and perhaps their identity”*. This is noticeable in the learners’ demeanour as they gain more confidence during their PD learning and they begin to release themselves from the self-imposed shackles and fully engage in the ethos of PD. Quite quickly then, the change in demeanour, availability to other group members, and the articulation of these new understandings ensues and becomes evident. This can result in quite a substantial transformation for the learner. The process of coming to understand a TC often involves a period of liminality, (similar to Mezirow’s *“disorientating dilemma”* mentioned earlier) involving fluctuation between levels of understanding (Land, Cousin, Meyer and Davies, 2005) and mimicry of understanding (Cousin, 2010). This mimicry is observed when PD learners outwardly behave as though they are fully engaging with PD, going through the motions of checking in and out and contributing something to the group. Cousin (2008) argues that threshold learning is a form of identity work that requires supportive liminal environments, ones that enable engagement with uncertainty and the discomfort it can provoke, and that attend to *“the dialectic between knowing and being”* (p. 264). Cousin’s (2008) argument resonates with PD; learners going through the motions of PD mimicking their understanding until they can reside comfortably within the discomfort and sit and find a way through, or make peace with the knowing and being. It is Gibbs (1995) who agrees we should, *“emphasise learner activity rather than passivity”* (p. 1). Regardless of any moments of passivity observed in PDG, there is always activity, as each group member will have contributed to group at least on two occasions, through check-in and check-out. Moreover, that which may be regarded as passivity by an onlooker may in reality be activity. Activity can be a silent internal endeavour.

Land in his LIT (2018) keynote address provided the progressive function of the liminal state. The term liminality was adapted by Meyer and Land (2005) from Van Gennep (1960) and Turner and Mitchell (1969) to convey a transformative state that engages existing certainties and renders them problematic, and fluid; a suspended state in which understanding can approximate to a kind of mimicry or lack of authenticity; liminality as unsettling or sense of loss. It would seem from observation that many of our PD learners find themselves in this liminal state at the outset of PD. The progressive function of the liminal state matches what occurs during the course of PD learning and is as follows:

- Countenancing and integration of something new
- Recognition of shortcomings of their existing view
- Letting go of the older prevailing view
- Letting go of an earlier mode of their subjectivity
- Envisaging (and accepting) an alternative version of self
- Through the threshold space (as a practitioner) there is a “*reauthoring*” of self. “*undoing the script*” (Ross, 2011, cited in Land et al., 2014, p. 3), and I would add, as a learner and practitioner; for the purpose of SCW both are inextricably linked.
- Acquiring and using new forms of written and spoken discourse and internalising these (slide 28).

Finally, as the application of TC theory has spread across disparate fields and disciplines, Meyer, Land and Baillie (2010, p. 401) have encouraged an expanded notion of “*concept*” to include threshold learning, threshold experiences, and threshold areas of practice.

4.5 Summary

This chapter looked at the SCW curriculum, PEP and supervision and applicable research, before moving on then to consider educational and transformative education and threshold concepts and their applicability to PD and PEP. What follows next is the methodology chapter, which describes the approach and methods used for data generation, in addition to how the generated data was analysed.

Chapter Five: Research Methodology

5.1 Introduction

The previous chapter looked at the SCW curriculum, PEP and supervision and applicable research, before moving on then to consider educational and transformative education and threshold concepts and their applicability to PD and PEP. The purpose of this chapter is to critically discuss the research methodology adopted for the study. Within this chapter, a methodological overview will be provided for evaluating, if the PD module from LIT SCW HE programme is relevant and beneficial for SCLs, SCWs and their PEs. A summary of the research and an outline of the research questions will provide the foundation for the remainder of the chapter. The research design and approach will be conveyed in addition to a methodological framework for this practitioner-based study. The pertinent theoretical methodological landscape will also be outlined. From there, a concise sketch of the theoretical framework identifying the qualitative research methods adopted will be provided and the rationale behind why they are deemed the most appropriate for this study. Data generation and its techniques are then detailed, in addition to, the justification of selecting them and some of the challenges encountered during the field work phases. Ethical considerations, an underlying thread throughout this thesis, will then follow, in addition to describing the data analysis process. The chapter will conclude with limitations of the study and a brief summary.

5.2 Research Questions and the Conceptual Framework

This is the main research question; “Is the PD module from LIT SCW HE programme relevant and beneficial for SCLs, SCWs and their PEs?” In short, what is the role of the PD module for SCLs in HE, PEs and SCWs and their practice? There are three sub-questions to assist with keeping the focus on, and answering, the main research question. I want to define and discover the answers to the following:

- How are PD, SCW and PEP defined, conceptualised and operationalised?
- How do participants and respondents articulate the content of their learning and their experience of PD as a pedagogical and practice process?

- What role, relevance and benefit, if any, does PD have in SCW education, PEP and SCW practice?

My ontological stance and rationale for carrying out this research revolved around my teaching and facilitating the PD modules, at the centre of this research, over the 4 years of a Level 8, SCW programme at LIT since January 2013. Prior to teaching and facilitating the PD module, I practiced as a SCW for over 20 years, 16 of which were without PD learning; PD learning was provided when I undertook an M.A in Therapeutic Child Care. This next section details the research design.

5.3 Research Design

The research design is the specific framework within which this empirical research is pursued and completed. Taking a case study approach provided the framework, not only to improve the credibility of this study, but to also examine PD within a context of HE and SCW practice. Clark, Foster and Bryman, 2019; Aurini, Heath and Howells (2016) remind us that not only are we discovering meaning from the experiences of the participants and the respondents but we are also paying attention to the very different cultural and social frameworks in which they dwell. This case study approach (revisited in section 5.4) incorporated and triangulated multiple sources of data. Data was generated in four phases:

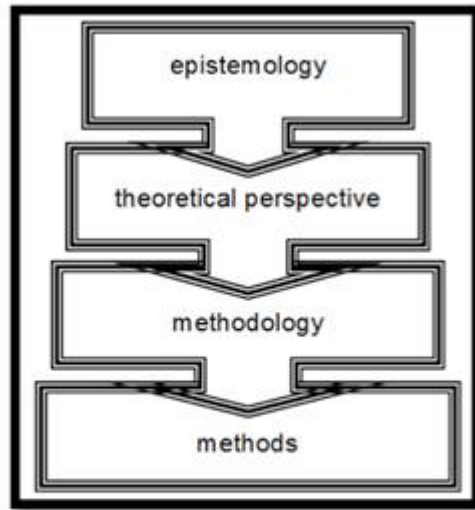
Phase 1: A Pilot study involving semi structured interviews with 4 PEs, 3 SCW graduates and 1 focus group with SCW graduates in addition to piloting the online diary with 9 potential respondents of which 4 completed the online diary.

Phase 2: 21 semi structured interviews with LIT SCW graduates with PD learning.

Phase 3: 20 semi-structured interviews with PEs who have attained a LIT SCW degree which incorporated PD learning over four years.

Phase 4: 10 weekly on line diary entries with 12 of the 21 SCW graduates interviewed.

Below is a depiction of the research design, inspired by Crotty (1998) who advocates a four-element pyramid structure to assist with making key methodological approach decisions.



The four elements of Crotty (1998) as part of research decisions. This image is copyright to Crotty (1998).

Epistemology (*Constructivist/Interpretivist*)

Theoretical Perspective (*Constructivism/Interpretivism*)

Methodology *Interpretive (double hermeneutic)/Constructivist (phenomenology) Qualitative Case Study.*

Phenomenology (the study of human experiences and of the ways things present themselves in and through such experience- Sokolowski, 2000, p. 2) *and double hermeneutic* (the participants/respondents are trying to make sense of their personal and social world, and at the same time I'm trying to make sense of the participants making sense of their personal and social world (Smith and Osborn, 2008).

Methods

(semi-structured Interviews and online diaries)

Figure 1: Research Design

This research explored the process of PD as an educational and practice pedagogy, in addition to the professional practice of SCW. It is this exploration of the PD process that activated a case study design in order to answer the research question (Flick, 2018; Flyvberg, 2006; Creswell, 2007; Yin, 2004; 2018). An in-depth understanding of the case could only be delivered through utilising this most apt research approach. What follows is the research approach taken.

5.4 Research Approach: The Case Study

This research was organised around a research approach and addressed how the questions set out for this research were explored. The choice of research approach and subsequent design was driven by the question (Loxley, 2010). Implementing a qualitative research approach and research methods, leading to the generation and analysis of the data, mirrored the PD approach to learning through conversation and reflective journal keeping. Connecting with the participants and the respondents through conversation, I aimed to identify descriptive moments to understand if/when PD learning was transferred to PEP and SCW practice and if so how? This research built on previous investigations of PD learning for various professions other than SCW, since PD for SCLs and SCWs and their PEs has not previously been researched; most likely since only LIT (and previously one other IOT) provided PD as a stand-alone module within their SCW programme.

It is important to build up layers of awareness and personal knowing through RP and lived experience in order to practice as a SCW (McLeod and McLeod, 2014). Similar to PD, this case study built the layers associated with the main research question and associated sub-questions until the research questions were answered. This was achieved from examining relevant literature, from interaction through semi-structured interviews with SCW graduates and PEs, and data generated from on-line solicited diaries. These research layers led to the development of this case study. Qualitative inquiry focused on eliciting meaning within the context of the topic under investigation (Creswell, 2013). Bogdan and Biklen (2003) augmented this view when they noted qualitative research examined “*how people such as teachers... and students think and how they came to develop perspectives they hold*” (p. 3). The participants were coming from a previous learner and current SCW perspectives. Keeping this in mind augmented my awareness that even though the participants and I had experienced PD, it was vital to gain the contextual aspects of their PD experiences, and to explore emerging themes holistically. Since the research was also an evaluative piece of work which involved description, explanation, and professional judgment with an awareness of personal judgement (Merriam, 2009), a case study approach was considered the most appropriate within both an educational and practice context. Furthermore, the case study approach could easily incorporate data generation from two methods and three sources. Semi-structured interviews and online solicited diaries was the preferred methods through which to generate the data for this research. Numerous

facets of the case in this case study were highlighted within chapter two, three and four; PD in its pedagogical and practice entities coupled with the numerous players - SCLs, SCWs and PEs and the individuals worked with. Furthermore, chapter three and four address the inner workings of PD, the case, for the purpose of aiding the evaluation of PD for SCL, PEP and SCW.

This qualitative case study approach as described within the methodological literature by Stake (1995; 2010), Flyvberg, (2006), Denzin and Lincoln (2018), Denzin and Lincoln (2017), Miles, (2015) and Yin (2004; 2018) tends to reside within the interpretivist/constructivist paradigm. Similar to Stake and Yin's views about case studies, this case study demonstrated that multiple perspectives were sought from those involved in the case, with the intention to gather multiple views of what occurred during PD learning, PEP and SCW practice. In this instance, and according to Lincoln and Guba (2000), as a consequence of the PD module taught solely in LIT, the ontological belief is that reality is local and specifically constructed. This relativism was observable from data generated from the pilot study. The criteria to participate in the pilot study was wider than this current study. It was only necessary for PEs to have supervised an LIT SCL for the duration of their PEP. In my initial naivety, I sought SCWs regardless of the HEI they had graduated from. Whilst they had a wealth of experience of supervising PEP, they were unable to speak to PD since their qualification was not always a SCW qualification. Without a SCW qualification from LIT, and more specifically incorporating PD learning, participants were unable to engage with the research topic due to its local and specific nature. (ICERI, 2022, conclusion). The next section focusses on the criteria to classify a case study as a case study.

Case study criteria

The case study approach was chosen after much consideration of the work of Stake, (2006), Yin (2017) and Flyvbjerg (2006). Yet, it was Miles' (2015) work that finally led to adopting a case study approach for this study. This is in part because whilst acknowledging the flaws of case study research she argued that a case study provides the material to report on practice related to educational research. The material delivers the knowledge of experience that leads to providing a "*conceptual contribution to research understandings of practice*" that is credible (p. 309). A recognised marker and criteria for the credible adoption of the case study is the depth of which PD was

studied. Depth can be considered through duration and it is this duration that gave this case study temporality. Temporality also augmented the case study in great depth. This was achieved in three ways. Firstly, 12 SCW graduates provided 10 weekly solicited online diary entries. Secondly, temporality referred to the 4 years when participants acquired their PD learning. Thirdly, the LIT SCW programme is in existence since 2003 to the present day and SCW participants had graduated no later than 2016. Fourthly, with the exception of two PE participants, all PEs had graduated earlier than 2013. Fifthly, participants and respondents were employed as SCWs no less than one year. There was an embedded unit within this case study, namely PD where SCW was the singularity, made up of all the participants and respondents which also increased the depth of this case study. It could also be said the different viewpoints generated from generating different kinds of data through multiple methods may also add to the depth of this case study.

This PhD study is boundaried around time, particularly in terms of the data generation. Data generation (including pilot studies) commenced in 2016 and was completed in 2019. Other boundaries included research and diary questions which remained the same for each participant. Moreover, the criteria for participants also remained consistent in terms of who could and could not participate. Respondents were boundaried in terms of inclusion and exclusion criteria and the questions remained unchanged for the ten weeks of their participation. A geographical boundary was also evident in this case study; participants and respondents resided and worked in the Munster area. More specifically, the geographical boundary included Limerick, Clare and Tipperary. The samples and sampling strategy is the topic of this next section.

5.5 Samples and Sampling Strategy

In this section, the characteristics of the sampling criteria and sample strategy will be described, in addition to the procedures adopted to recruit participants and respondents who were representative of a larger group (Fraenkel, Wallen and Hyun, 2015).

The sampling criteria ensured that the participants/respondents for this research had completed four year's study on the B. A (Hons) in SCW at LIT and had engaged with the PD module every year over four years (with the exception of one SCW participant who transferred to LIT in Year 2). It was also a requirement that participants had

completed two PEPs over the course of their four years on the SCW programme. In addition, potential SCW participants meeting the educational criteria were required to be employed or volunteering in a SCW capacity for no less than one year to be deemed sufficiently reliable to answer the interview questions related to PD and SCW practice and to keep the solicited online diary.

The sampling strategy employed for data generation was a combination of both purposive and snowball sampling. A purposive sampling strategy allowed for the selection of both SCW and PE participants deemed suitable to answer the research questions from a population most familiar with the PD module and SCW practice. Thus, they had the relevant expertise and knowledge to answer the research questions (Lindlof and Taylor, 2017; Valerio et al., 2016; Silverman and Patterson, 2015; Matthews and Ross, 2014).

Snowball sampling occurred when a small number of other PEs and SCW participants were identified with the required characteristics to answer the research questions, with a view to asking those participants to recommend other participants. In other words, primary research participants became recruiters within this research process (Cuthriell, 2014; Matthews and Ross, 2014). This was observed when participating SCW managers and supervisors sent emails to their staff informing them of my call for participants. That call yielded 6 participants in total. Equally, some SCW participants also sent emails to their managers/supervisors informing them of my request for participants. Despite all these efforts, it proved extremely difficult to secure suitably qualified participants to meet the PE criteria. This next sub-section will discuss the contribution of the pilot study.

5.5.1 Pilot study participants

Bryman (2016) and Castillo-Montoya (2016) advocated for the necessity to undertake pilot studies and this was true for this research. The pilot study illuminated the flaws in the initial study design. The pilot study results alerted me to the futility of seeking participants without an LIT SCW degree for any phase of this study. The pilot study with SCW graduates was to examine if PD was beneficial or relevant to them (Findings and conclusion for ICERI 2022 paper) in their practice. I offered dates and times to SCWs and whoever was free was interviewed. I offered three dates and times for the SCWs pilot study focus groups and only one group formed with 3 male participants.

As suspected, and confirmed through the pilot study, focus groups were an unsuitable method due to the personal nature of elements of the inquiry, in addition to the inability, on my part, to guarantee anonymity and confidentiality. Moreover, a focus group does not allow for trust to develop among participants due to its limited timespan. Three semi-structured interviews with three females completed the SCW element of the pilot study. The PE element of the pilot study comprised of four semi-structured interviews with one female and three males. This element of the pilot study was to examine if PEs found PD beneficial or relevant to SCLs during their PEP and later as SCWs in their practice. Three participants were known to me professionally from having visited SCLs during their PEP and asking if they would participate and one participant was recommended to me. Only one participant had a SCW qualification and that only became apparent during the interview. The pilot study for the online diaries was carried out with one entry the week (Methodology ICERI 2022 paper) prior to the data generation schedule. This element of the pilot study with SCWs was to examine if PD was beneficial or relevant to them in their practise and to demonstrate weekly through the online diary if and when PD was beneficial or relevant to them in their practice. Nine respondents (not previously interviewed) agreed to participate, yet, for reasons unknown, only 4 respondents completed the pilot online diary. From the four responses to the pilot study, it appeared the questions were understood. In addition, another aim of the pilot study was to ensure the diary was as time efficient as possible due to the demanding nature of SCW.

I made two further discoveries from implementing this pilot study. Firstly, participants did not read the information sheet which contained an overview of the PD curriculum and its LOs. Secondly, despite their best efforts, the participants, with the exception of one LIT SCW trained participant, were unfamiliar with the language, context, and content of the PD module. Thus, they were unable to make any feasible links between PD and SCW practice. This second discovery aligns well with the views of Creswell and Plano Clark (2017) who express the importance of inclusion and exclusion criteria for research participants to have experience and knowledge of the research topics (Methodology ICERI 2022 paper). As a result of these discoveries, I amended the participation criteria to include only LIT SCW graduates for all phases of this study. Graduates from HEIs other than LIT did not fully understand the concept of PD. PEs having graduated from a profession other than SCW and specifically, SCW in LIT, did not demonstrate any understanding of PD. I also gained a better understanding of

what I was examining for this study and reduced the number of interview questions asked of both SCW graduates and PEs. The participants profile is described next.

5.5.2 The participants' profile

This research was predominately conducted with the SCWs in my office and with the PEs in their place of work, with some exceptions. The participants worked in a range of services such as homelessness, addiction, child residential services, family projects, disability services, respite care for families or young people, prison services, and asylum seekers services. With the exception of two participants who work 23 miles away from LIT, the remaining participants worked within a 5 mile radius of LIT.

SCW is known to be a predominately female endeavour. And so I expected the majority of participants to be young white females. However, SCW participants, for this research, included 6 SCW male participants; 4 of those 6 males entered the SCW programme as mature learners and one of those was a non-Irish mature SCL. Fifteen female SCW participants were interviewed; 7 of those 15 participants entered the SCW programme as mature learners and 8 entered the programme as school leavers. The call for SCW participants did not entice any non-Irish females.

Participation for the PE phase of this research was also contingent upon having studied SCW at LIT. Many SCLs and SCWs are supervised by individuals from other professions such as nursing, support workers, youth workers, psychologists, teachers, and special needs assistants. Having further reduced my sampling criteria to exclude PEs without PD learning narrowed the pool of possible participants even further. It took much longer to recruit PEs than it did to recruit SCW graduates. PEs who graduated with a SCW degree from LIT were capable of providing their experiences and observations of SCLs during their PEP and SCW practice. Additionally, they also possessed the PD knowledge and language to discuss their experiences of PD, not only in their own practice but that of their colleagues too. Through purposive sampling, one PE was invited to participate in this research. I had a professional relationship with this participant and they suggested other likely participants and some of those participants suggested other likely participants, thus the snowballing method of recruiting participants was activated until sufficient PE research participants was recruited to participate in the interview phase of the research. Both purposive and snowball sampling were simultaneously engaged with to access all participants. PE

participants included 14 female participants, one of whom was non-Irish in origin and 6 male participants. (See Appendix W -pseudo names).

Online diarists included five of the six males interviewed. The first seven females interviewed agreed to participate. This brought the total number of online diarists to twelve. The aim was to invite the first 13 participants interviewed to participate in the online diary. Based on the online diary pilot study, I aimed for 10 respondents with an excess of 3 respondents available if any respondents later decided not to participate. In the end, only one respondent declined, leaving 12 respondents to complete the online diary weekly for 10 weeks.

In recruiting participants and respondents, I was very much aware of the demanding nature of their work, often 12-hour shifts, overnight shifts and weekend shifts and conscious of not adding to their heavy workloads. However, I was overwhelmed by the response to my request for SCW participants. These were the participants best placed to answer the research questions. The research methods and data generation will be discussed next.

5.6 Research Methods and Data Generation

The research methods adopted for this case study were qualitative in nature. The rationale for this qualitative research approach was to illustrate and explain, former SCLs currently practicing as SCWs and PEs, experiential life as it was experienced, "*felt, undergone, made sense of and accomplished*" (Schwandt, 2007, p. 100). Sub-sections 5.6.1 and 5.6.2 will detail the chosen methods and the rationale for choosing those methods. What follows is how this qualitative empirical data was generated. Sub-section 5.6.1 and 5.6.2 will discuss the overall data specifically focussing on the data generation with each set of participants/respondents.

5.6.1 Data Generation - Semi-Structured Interviews

Participants' and respondents' accounts of their personal and pedagogical experiences of PD and subsequently how or if PD learning transferred to their SCW practice was sought through qualitative methods. It is through these selected qualitative methods that allowed the participants' and respondents' voices to contribute to and permeate this research (Conway, 2020; Creswell and Creswell, 2017; King and Horrocks, 2016). These qualitative methods included semi-structured

interviews with SCW graduates and PEs and solicited online diaries with SCW graduates. Robson and McCartan (2016) argue that adopting semi-structured interviews as a data generation tool grants participants time to think and speak at length about the topic under investigation. This is also true for the solicited online diaries since the respondents were immersed in the topic under investigation for ten consecutive weeks. Generating data from individual participants allowed for a more focused interpretive and reflexive exploration of the research question (Patton, 2015).

Galetta (2013) recommends convening interviews with the participants in a location whereby their comfort is kept in mind. I was fortunate that, when given a choice of venue the SCWs, with the exception of four participants, all chose to participate in the semi-structured interview at my place of work. The interview for two of those participants was convened at their office, with two interviews convened at a hotel near LIT. In contrast to SCW graduates, only three PEs were interviewed at my place of work, with the remainder opting to be interviewed at their place of work. All SCW participants, with the exception of one, had been in my PD class at least once over the four years of their study. Also, unlike the majority of SCWs, twelve PE participants were unknown to me prior to interview; five participants were met once, briefly, as part of my work visiting SCLs during their PEP and three participants were former students of mine, having graduated since 2013. Time was allocated to the interview schedule to allow for chatting before and/or after the interview based on my interpretation of the participants' cues. Overall, more time was required at the beginning of the interview to allow unknown participants to become comfortable and at ease. Råheim, Magnussen, Sekse, Lunde, Jacobsen and Blystad (2016) recognise that this open dialogue has the potential to balance any unequal power dynamics between the participants and researcher.

The data generation process (excluding pilot studies) for SCW graduates began July 24th 2017 and ended June 20th 2019, taking place over 23 months. The data generation process for PEs began December 14th, 2017 and ended October 24th, 2019, taking place over 22 months. It was not necessary to generate interview data swiftly since the data sought was a retrospective account of the participants' experiences of PD. Semi-structured interviews were the method employed to generate data for this research. Hvidtfeld (2018) contends that semi-structured interviews can be an anonymous tool for data generation and are generally considered "*to provide*

reliable, comparable qualitative data" (p.261). Having interviewed both LIT SCW graduates and PEs, this doubled the likelihood of attaining "*reliable, comparable qualitative data*" (Bernard, 2018, p. 212; Hvidtfeld, 2018;). Semi-structured interviews involved a disciplined inquiry, meaning, very little deviation from the questions and sequence of questions asked to participants. (Shaw, Hiles, West, Holland and Gwyther, 2018; Weathington, Cunningham and Pittenger, 2017). In order to answer the research question and sub-questions, the interview schedules (see appendices A and B) were devised to examine the participants' professional and, to some extent, personal lives, experiences and behaviours related to PD and their SCW practice. The questions were divided in to three sections - PD learning, PEP and SCW practice. The open ended style of the devised questions allowed the stories and meanings ascribed to the learning and practice experiences and behaviours unfold in a manner that could not be anticipated in advance (Neuman, 2015; Galletta and Cross, 2013). Additionally, it was expected that the analysis of the semi-structured interview data would answer the research questions and perhaps most importantly illuminate the phenomena of the participants' experiences of PD or the meanings attributed to those experiences. For that reason, and after careful consideration, semi-structured interviews were chosen as one of two tools for data generation (Bryman, 2016; DeJonckheere and Vaughn, 2019; Conway, 2020).

Verbal and nonverbal interaction was key between both the participants and myself during the interviews. Awareness of these modes of communication alerted me to when the question was fully answered before interjecting with another question or comment. Semi-structured interviews also provided the scope to check that I understood what the participant was communicating to me. Also, observing non-verbal interactions ensured I kept the participant comfortable and moved to a different topic if I sensed unease when a question was posed or to rephrase if the participant looked baffled (Bryman, 2016). Furthermore, semi-structured interviews also mirrored, very well, the style of PDGs; namely, the ability to tease out meaning from the spoken word which would have been impossible if questionnaires/surveys were incorporated as data generation tools. Semi-structured interviews also allowed the participants to clarify what was asked of them. In addition, as a face to face interview, it was possible to gauge the participants' level of comfort with me and with the questions asked (Allen, 2017; Ritchie and Lewis, 2003). Finally, having studied, and in my case, facilitated PDGs, silence was only filled by waiting, observing the participants' body language

and facial expressions. It became clear when they had articulated all they had to say in answer to the questions. For this reason, the participants' concentration or opinions were not interrupted (Conway, 2020; DeJonckheere and Vaughn, 2019; Bryman, 2016; Seidman, 2013). Semi-structured interviews are an important tool for generating qualitative data and provided a controlled framework for data generation. In this instance, the interview guide was the controlled framework and was provided to all participants prior to interview (Hennick, Hutter and Bailey, 2020). Moreover, the interview guide also facilitated data analysis discussed in section 5.7. As Frost (2011) contends, interviews also bring a unique perspective to the way that participants see and comprehend their world, linking very well with being an insider and also how I experienced the interviews to resemble the PDG facilitation experience.

It would be remiss not to mention some shortcomings of incorporating this qualitative method. One such shortcoming highlighted by Nelson and Gilbert (2021) and Stake (2010) is that biased views could influence the research findings. Yet, Suter (2012) informs us that totally unbiased researchers only exist in theory. Bias was negated through consistent reflexivity and by informing the participants it was their true account of their experiences of PD and SCW that was required. Gaining this true account in turn led to a more reliable and trustworthy study. Researcher bias was negated to a large extent through ensuring an appropriate balance between reflexivity and subjectivity was maintained throughout the research process (Morrow, 2005; Letherby, Scott and Williams, 2013). Contradictorily, Potter (2002) maintains reflexivity, realistically, is impossible to achieve; the researcher is either named as a "*co-participant*" in the data generation or removed entirely from data generation. I disagree with Potter for two reasons. Firstly, we cannot know what every individual is capable of and, secondly, as a SCW and PD facilitator, reflexivity is second nature, often occurring automatically and certainly before, during, and after each interview. Reflexivity which, according to Giddens and Pierson (1998) is to consciously think about one's place in the social structure, with the ability and capacity to self-examine whilst recognising and adapting to areas of socialisation. Reflexivity, particularly during each interview, allowed for relevant follow up questions to the main question asked. It was necessary to ensure before each interview that I was emotionally and intellectually present; the participants were entitled to and deserved my full attention. On days where two or more interviews took place, I ensured time was devoted, between interviews, to reflect on the interview, on my part and the participants' part in the

interview. Being aware of my bias in favour of PD was always to the fore of my mind. I would not teach PD, facilitate PDGs, and devote six years of study to the topic if I did not believe in its relevance to the graduates working with vulnerable people. I did keep my ontological and epistemological views to the fore to identify a range of beliefs without introducing bias from my own world view. However, another way bias was attempted to be diminished was to invite participants to check the findings. Of my sample, Diarmad was the only participant who agreed to review the findings. Whilst he was not a PE participant, he had recently begun to supervise PEP learners. I adopted the suggestion to remove the emms and ahhs from the provided quotes as Diarmad believed, at least in his own case, that it suggested an inability to speak coherently with the essence of the content appearing to be diluted or lost.

The interview only commenced once the participants seemed at ease, and any instances of the former teacher/learner relationship was moved to a more equal footing. This occurred when I explained my openness to hear everything they had to say, I was there to learn from them, they were the experts. I was then capable of setting aside my personal involvement in the interview. I focused solely on garnering participants' views on their experiences of PD and if it held any relevance to them personally and/or professionally. I was fully attuned to the participants as they retrospectively told of their experiences of PD, PEP and its current application to SCW practice. Solicited online diaries is the focus of the next sub-section.

5.6.2 Data generation - Solicited Diaries

After each of the first 13 SCW graduate interviews I asked those participants if they would consider keeping a ten week anonymous online diary to document if/when and how they thought about PD in relation to their practice. One week before the online diary began I emailed the thirteen prospective respondents with a copy of the diary and asked if they could commit to completing the diary weekly. Twelve respondents agreed to participate. Semi-structured interviews with LIT SCW graduates from between 2007-2019 could be argued to provide dated retrospective accounts of the phenomena under investigation. Online solicited diaries containing both structured and unstructured components were incorporated into the study design to overcome this argument, thus overcoming reliance on solely retrospective accounts (Bartlett and Milligan, 2015). Online diaries were chosen as the most suitable method to generate

data to enhance the semi-structured interview. However, online diaries could have provided sufficient data as a stand-alone method.

The purpose of the diary was to provide access to a more in-depth understanding of the respondents' interpretations of their worlds, thus providing a useful tool for generating realistic documentation to answer the research questions (Janssens, Bos, Rosmalen, Wichers and Riese, 2018; Milligan, Bingley and Gatrell, 2005). These online diaries were relevant in answering the main research question but also aspects of the sub-question- "How do participants and respondents articulate the content of their learning and their experience of PD as a pedagogical and practice process? These solicited online diaries led to the generation of real time data in the natural environment of the SCW (Waddington, 2013). That is to say, data was provided week by week for ten weeks. The weekly written documentation offered a range of complexities and fluctuations in the SCWs personal and practice life (Ohly, Sonnentag, Niessen and Zapf, 2010). Furthermore, keeping an online solicited diary mirrored the requirement for SCLs to keep a PD reflective journal throughout their four years of PD learning.

Bijoux and Myers (2006) note that combining the diary with other data generation methods (triangulation) "*adds rigour, breadth, complexity, richness, depth, and creativity to the research*" (p. 48), thus allowing any limitations of the semi-structured interview method within this case study to be offset with the online solicited diary method. The diary questions (see Appendix C) remained unchanged each week for 10 weeks and were based on areas related to PD that emerged from the semi-structured interviews; they were solely related to the week the diary entry was due. The online diary added trustworthiness and credibility (discussed in section 5.7.3) to this research as the diary entries are dated and time stamped. Whilst the majority of diary studies are quantitative in nature (Kubacki and Rundle-Thiele, 2018), some studies present findings from written qualitative diaries on a range of topics (Radcliffe and Cassell, 2015; Cohen, Leviton, Isaacson, Tallia and Crabtree, 2006). Clarkson and Hodgkinson (2007) examined the contribution of the qualitative occupational stress diary, claiming it to be a "*simple but powerful self-reflective tool that can complement and extend more traditional methods by contributing depth to already established theoretical relationships*" (p. 684). And whilst the diary tool of this study is not intended to be a stress diary, it had the potential to relieve stress and contribute

more deeply to the respondents' reflections and experiences. Despite the rise in diary studies of a qualitative nature, few publications devote time towards assessing the specific contribution of qualitative diary studies (Waddington, 2013; Symon, 2004). Alaszewski (2006a) stated that, until 2006, only a single text on diary method existed.

The detail gained from solicited diaries, as noted by Nicholl (2010), can often be lost in methods such as interviews, where the participant forgets details or considers certain experiences to be inconsequential and not worth mentioning. The online diary provided the scope to be transported to the respondents' lived experiences without ever leaving the office. It is also possible the respondents felt more empowered, relaxed and had more scope for reflection in their own environment and answering questions at their own pace. Completing the diary could also have led to therapeutic benefits and prompted the need to self-care. This could have occurred since respondents were capturing life as it was lived (Bolger, Davis and Rafaeli, 2003).

However, Mazzetti and Blenkinsopp (2012) highlight the limitations of diary studies, including the significant demands on respondents, which lead to high levels of attrition. The lowest participation, in week six, was 50%; week one and week five had a participation rate of 83.3%; week two, three, and seven had a participation rate of 75%; week four, nine, and ten had a participation rate of 66.6%; finally, week eight had a participation rate of 58.3% (see Appendix W). Mazzetti and Blenkinsopp (2012), argue that while striving to make the diary process less complicated for respondents, diaries inevitably become more formulaic. A formulaic diary is believed to reduce the richness of the data collected, where instructions can be prescriptive and dilute freedom in respondents' responses. With this awareness, I tried to achieve a balance; not overly prescriptive and yet there had to be a formula in order for the respondents to answer the research questions. Nonetheless, the aim was to allow respondents sufficient scope to make the contributions they wished to make. Providing a framework through which respondents could navigate their experiences was deemed useful, as it would reduce any anxiety around respondents wondering what they should write about. It is worth noting that Conrath, Higgins and McLean (1983) found diary data to be more reliable than questionnaire data because the diary entry is recorded when the information is still fresh in the respondents' mind. However, they claim if a diary entry required more than five to ten minutes per day to complete, then the reliability may be compromised. The online diary for this study was designed to be completed in less

than ten minutes; the diary layout was designed with two yes or no responses and a multiple-choice question interspersed with short/long answer questions. Moylan, Derr and Lindhorst (2015) and Armeli, Todd and Mohr (2005) suggest that future research needs to explore new technologies for data capture and, with this in mind, I incorporated google forms to provide the template for the online diary data generation tool.

Contemplating matching respondents' workloads with new research technologies, I became interested in google forms as a way of taking the work out of constructing diary packs for respondents and also to alleviate the issues of a physical diary. Internet-based diary research is steadily being studied further as a viable research method, particularly since about 2007 (Bartlett and Milligan, 2015). This is evidenced by various pieces of work, including a systematic review of the effectiveness of using electronic diaries in pain and symptom research (Burton, Weller and Sharpe, 2007) and a review on the benefits of using electronic diaries to gain a fuller assessment of clients in their own environments (Piasecki, Hufford, Solhan and Trull, 2007). Yet, there is a dearth of studies examining google form-based diary studies, even though web-based diaries were mentioned by Ohly et al., (2010) they did not specify google forms. The majority of published technology-based diary studies focus on social media, email, vlogs, and blogs and not on google forms as a platform for generating data (Hooley, Marriott and Wellens, 2013).

Google forms was developed as a standalone application in early 2016 and are exactly what they say they are; forms. They can be developed in any way that suits the user. It was risky to adopt google forms as a diary method, since research on their effectiveness as a data collection tool for a study such as this is non-existent. However, they were an irresistible tool for their ease of understanding, setting up, handling and are cost free and most importantly, the ease with which the respondents could navigate the diary. Google forms work from a google account. Changes can be continuously made throughout the designing process, with options to delete, edit, or duplicate; there are also options for responses, small amount of text, paragraph of text, and multiple choice responses. This element of the research design allowed for a multitude of unforeseen circumstances to be documented and contextualised as they occurred during this data generation phase and offered valuable insights into the topic under investigation. Furthermore, for the respondents, this was the most

straightforward manner through which to provide data, even more so than interviews, since they were not under an immediate response time pressure unlike interviews. I emailed a link generated from the google form to respondents, they clicked the link, and then completed the diary and clicked submit. This ruled out having to scan/email their diary entry. All diary entries were anonymous; I only had knowledge of how many respondents participated but not who participated.

What finally led to the decision to adopt google forms was their ability to transfer the information immediately to a google spreadsheet, which seemed to eliminate human error and the necessity to transcribe the diary entries. However, though not an issue with the pilot study, google forms was unable to detect two anomalies that arose. The first anomaly referred to respondents who inadvertently submitted their diary entry twice; this occurred 4 times over the duration of the 10 weeks. The second anomaly related to respondents who were asked to answer Yes or No if previous PD learning was useful to them last week; twice a respondent/respondents replied No but went on to tick the multiple choice box question relevant to their interactions the previous week. This respondent(s) then went on to explain what happened to remind them of PD and how their previous PD learning was relevant that week. For these reasons, the percentages derived from google forms, the chosen platform for these online diaries, were recalculated to determine the percentages based on the answers provided to one or more ticked boxes denoting which elements of PD were useful to respondents that particular week, along with an explanation as to why those elements were chosen.

To sum up, the relevance of an online diary data generation tool to this study is that it offered a personal account of how respondents experience PD in their personal and professional lives. The data analysis strategy will be discussed next.

5.7 Data Analysis Strategy

Once the data was generated from SCW graduates and PEs it was then transcribed and the respondents' solicited online diary entries were imported to excel, then data analysis (DA) was the next step. The aim of DA was to make sense of the voluminous amount of data in order to answer the research question and sub-questions. Bryman (2016) and Soukup (2012) endorse a qualitative strategy of constructivism and interpretivism to include active involvement of the participants who are prominent in reality construction. Throughout this research, the qualitative strategy of

constructivism and interpretivism fitted very well with this research. This was particularly true when the participants described PD experiences from their SCL perspective and now as SCWs and/ PEs. The respondents' prominence is the pinnacle of reality construction with online diaries, whereby respondents were tasked weekly with making meaning of their own experiences related to PD.

DA entails interpretation (Lyons and Coyle, 2021). An interpretivist stance provided focus and structure throughout all phases of this research but particularly the analysis phase (Žukauskas, Vveinhardt and Andriukaitienė, 2018; Denzin and Lincoln, 2017). Furthermore, I believe an interpretivist approach was the most appropriate stance, acknowledging that I am not independent from the research; I have PD experience, I am SCW trained, and I facilitate/lecture on the PD modules and I too, in the past, have supervised SCLs during their PEP. Hence, why reflexivity played a substantial role in this research and the subsequent analysis matched Braun and Clarke's (2021) six step reflexive thematic analysis.

Braun and Clarke (2021) refer to thematic analysis (TA) as "*a method for developing and interpreting patterns in qualitative data*" (p. 128). TA was the framework adopted to analyse the data generated from fifty-three participants/respondents. TA

is a method – a technique for analysing data – and can be used within any of the major ontological, epistemological and theoretical frameworks underpinning qualitative research ..." (Braun and Clark, 2021, as cited in Lyons and Coyle, 2021, p. 130).

TA, or more precisely in this case, inductive reflexive thematic analysis focused on meaning making by the participants and respondents. Braun and Clarke (2021) refer to TA as "*a method for developing and interpreting patterns in qualitative data*" (p. 128). TA is the focus of this next sub-section.

5.7.1 Thematic Analysis

This sub-section will provide an over view of TA in particular Braun and Clarke's (2021) six step "*reflexive TA*" (p. 132). This subsection also focuses on three main aspects of the data analysis. Firstly, I will provide an overview of how I approached the analysis of the generated data. Secondly, I will provide a more detailed account of how I analysed the interviews. Finally, I will explain, how I analysed the online diaries.

The analysis began, subconsciously for me, from first impressions when listening to the participants during their interview. From the moment I listened back to the audio of the interviews and whilst transcribing the interviews, I found myself typing in the voice of the participants and also thinking about how their contributions would answer the research question and sub-questions and the designing of the online diary. The meaning the participants were trying to convey when exploring and contextualising their perspectives also formed part of that first step in the analysis. Keeping my own research diary assisted with this exploration as I wrote any analytical insights and ideas that occurred to me. Leavy (2020) posits interpretive descriptions reside within an inductive analytical tradition and does not lend itself to content analysis. However, interpretive descriptions are more conducive to working repetitiously with the data and she states “*thinking about and organising insights*” that emerge from this process can lead to new insights and alternatives to come in to focus (p. 108).

Once the interviews were transcribed, each transcript was read at least twice with some parts of transcripts read a number of times. This reading of the transcripts is the final part of the first step in the analysis process. This part of the analysis process allowed me to familiarise myself with, and reflect on data that could possibly answer the research questions and sub-questions. From there, MAXQDA, a computer based data analysis tool was downloaded. Despite the name, MAXQDA does not analyse the data. A similar approach was taken with the diaries with two exceptions. Firstly, the diaries were already in a written format and secondly, I read the diary entries when they arrived to ensure the respondents were not experiencing any distress. This is synonymous with the first step of Braun and Clarke’s (2021) six step “*reflexive TA*” (p. 132). It is referred to as reflexive due to its “*theoretical flexibility*” as opposed to being theoretically-informed (p.130). Theoretical flexibility fits very well with this research, a predominately interpretive approach. The second step of Braun and Clarke’s (2021) reflexive TA was to move on to the coding using the MAXQDA tools.

MAXQDA’s usefulness and appeal was that it had the capacity whereby all the transcripts could be uploaded to the project area and colour coded codes were assigned to each line of text as appropriate. The codes allowed me to assign initial meanings to the text segments whilst also providing tools, such as comments, memos, and paraphrasing, to support a deep engaging exploration of the analysis (Roberts, Dowell and Nie, 2019). When everything was coded, I went through the PD code and

assigned comments to the coded text through MAXQDA. Saldana (2015) mentions how codes develop across categories to become concepts and theories. I chose to view the MAXQDA codes not only as my categories but also as concepts in an analytically thought about manner rather than a technological exercise. This is evidenced by the fact MAXQDA is unable to interpret the codes/categories. Furthermore, speaking the same language as the participants had one drawback. Participants referred to PD as “it” simply because I knew what “it” referred to – PD. This is another reason why each line of text warranted coding. I then carried out a lexical search in MAXQDA for the word “it” to ensure no instances of “it” relating to PD were missed. Because of the inductive nature of this thesis, the codes could be viewed as condensed descriptions of the phenomena apparent in transcripts, whereby, categories were created based on codes applied to the transcripts. To begin, I worked with broad thematic categories such as mentions of PD in the data and what elements of PD were mentioned and within what context. (See Appendix S for an example of the codes). Braun and Clarke (2021) suggest it is not necessary to code every piece of text. However, Lewin and Silver (2014) suggest that everything relevant to the research question should be consistently coded broadly. Fearful of missing vital information, I coded every piece of participant text for both SCWs and PEs. Another reason for coding every piece of participant text was to avoid the possibility of conscious or unconscious bias arising. I was unwilling to code only the text I deemed relevant. The coding of SCW and PE transcripts provided 6,900 and 7,640 codes, respectively.

These codes were chosen from what was apparent in the first SCW and PE transcript. In the second and subsequent transcripts, I looked for instances of codes attached to previous coded transcripts and added to the codes in this manner until every transcript was coded. I also backtracked to see if new codes apparent in subsequent transcripts could have been missed in previous transcripts. When the initial coding was completed, I went back over the codes and began to look at where the instances of PD arose and within what context. Instances of PD arose consistently across all text and within the context of education, practice and personally (see mind map appendix X). I began to cluster codes that fitted together in to categories. This brought me on to the third step (initial theme generation) of Braun and Clarke’s (2021) reflexive TA.

For SCW graduates and PEs, PD, in relation to the research question and sub questions, arose in four broad categories: PD in SCW Education, PD in Group, PD in PEP, and finally, PD in SCW practice. PD experienced personally was also discernible and intertwined within all elements of the aforementioned categories. All the data under these four broad headings was condensed. This is when the fourth step (developing and reviewing themes) of Braun and Clarke's (2021) reflexive TA occurred. It soon became apparent that the categories were too narrow. I revisited the initial codes and noticed PD may have been the largest code by far but other categories were apparent due to the number of codes also assigned to them. Themes emerged from these categories based on the context of the text assigned to codes and mirrors the fifth step (refining, defining and naming themes) of Braun and Clarke's (2021) reflexive TA. This refining, defining and naming themes led to the five SCW graduate, five PE themes and three respondents' themes that became discernible related to the research question and sub questions. The next chapter will outline these findings which fulfils part of the final step (writing up thematic analysis). The remaining findings chapters and discussion chapter will fulfil the remainder of the final step of Braun and Clarke's (2021) six step reflexive DA.

With very little research available on qualitative diaries, it thus follows there is just as little written on analysing qualitative online diaries. Online diaries were uploaded to MAXQDA in their excel format. The analysis strategy adopted for the SCW graduates and PEs was utilised to analyse the online diaries. For some reason, and initially unbeknownst to me, not all of the online diary data appeared for coding, most likely because of my unfamiliarity with coding from excel. This went unnoticed until the categories were finalised and themes had become apparent. When the themes became apparent, I wondered why so many of the same quotes were applicable to each theme and rechecked the data and the assigned codes. It was at that point I realised two columns of data had not appeared for coding – The “Briefly explain why you chose the above option(s)?” related to the tick box element of the diary and “How did your previous PD learning assist with what happened?” was in response to what happened to lead the respondents to think of PD. Clarke and Braun (2017) and Saldana (2015) explain the need for flexibility and to adapt to contingency plans whenever the unexpected occurs during the analysis phases. I coded these columns of diary manually by reading them again and assigning appropriate codes. I returned to the categories checking to see if further or alternative categories were evident. No

further or alternative categories were required and also the three broad themes remained the same. The findings for online diaries will follow the SCW and PEs findings chapters.

I was continuously conscious of my biases but particularly at this stage of the research process and engaged in what Yin (2018) refers to as examining plausible rival explanations with input from member checking by one SCW graduate participant. This allowed the pursuit of puzzles and anomalies. Anomalies and puzzles became apparent in the online diaries which have been alluded to above, with further explanation to follow in the third findings chapter. The focus of this next subsection is on triangulation.

5.7.2 Triangulation

One of the strengths of this case study was the opportunity to incorporate various sources of evidence to aid data triangulation. According to O'Leary (2017) triangulation is when more than one source of data generation is adopted "*to confirm the authenticity of each source*" (p.144), to converge and corroborate findings from various methods and sources employed when researching the same phenomenon. This case study relied on four sources of data:

- Two data generation methods - semi-structured interviews with both LIT SCW graduates and LIT SCW PEs,
- Online solicited diary entries, and
- The literature review.

Another type of triangulation outlined by Weyers, (2008) Janesick (1999) is Interdisciplinary Triangulation, where more than one discipline is included in a single study. Whilst predominately an educational disciplinary study, it would be remiss not to acknowledge the discipline of Social Sciences, where SCW resides and upon which the educational study is based. A further two types of triangulation, as outlined by Denzin (2017) and Patton (2015), are relevant to this case study: Theory Triangulation, where multiple theories or perspectives to interpret each single set of data, of which there were three data sets is predominantly observable in the discussion chapter.

What is interesting for this research is when Flick, Kardorff and Steinke (2004) contends that triangulation can be observed when "*comparisons and*

interrelationships” are sought which can emphasise any areas that are not immediately apparent to participants or researcher (p. 182). There are numerous comparisons and interrelationships across the three findings chapters, particularly between the SCW participants and the PE participants and between the SCW participants’ and the respondents’ online diaries. Furthermore, these comparisons and interrelationships are observable within the interplay between PD learning, PEP and SCW practice. Despite Yin (2018) determining data sets examined and analysed separately will not achieve triangulation, there are areas of convergence evident in the findings and discussion chapter. Equally, there are some areas of non-convergence of evidence evident in the subsequent chapters which do not negate the validity of those findings; this non-convergence most likely augments the trustworthiness and credibility of this case study. Trustworthiness, transferability and credibility is the focus of this next section.

5.7.3 Trustworthiness, transferability and credibility

Qualitative methods, according to Filep, Turner, Eidse, Thompson-Fawcett and Fitzimmons (2018) should, as far as possible, be “*trustworthy, authentic, reliable, appropriate, attestable, confirmable, and based on solid evidence*” (p. 452). Klenke (2016) claims it is the theoretical basis of the research that provides the reliability and transparency to the research. Williams and Morrow (2008) propose that three major categories of trustworthiness exist: integrity of the data, balance between reflexivity and subjectivity, and clear communications of findings.

Integrity of the data refers to the dependability of the data (Patton, 2002 cited in Williams and Morrow, 2008, p. 578) and dependability has been related to reliability (Geraghty, 2008). Dependability, in the context of this qualitative case study, was determined through examining whether the conclusions reached would be the same if another researcher had access to the same generated data (Denscombe, 2014; Long and Johnson, 2000). Verification as to how interpretations fit the data aided ascertaining the integrity of the data and was aided through member checking. Liberally interspersing direct quotes from the data to illustrate interpretations further ensured integrity of the data. Balance between reflexivity and subjectivity was mentioned earlier in this chapter, section 5.6.1, 5.7.3 and will be referred to again in section 5.8.1 and section 5.9.

It is also crucial for research findings to be clearly communicated in order to be deemed trustworthy. In addition, member checking was employed; Diarmad reviewed the findings for SCW graduates and PEs. Respondents were not chosen to member check since the online diary content was unique and personal to each respondent. Marrow (2005) suggests that the researcher's reason for carrying out the research should be to: improve outcomes for individuals, reveal limitations in current studies, encourage further research, or suggest new recommendations or change referred to as "*social validity*" (Williams and Marrow, 2008). All of the aforementioned were achievable with the choice of research questions, methodology and, consequently, the findings and is consolidated in the conclusion chapter. PD for SCLs, PEP and SCW practice has not been previously researched. Recommendations for further research will be provided at the end of the concluding chapter. To overlook ensuring transparency, trustworthiness, transferability, and credibility is to violate the ethical principles at the very heart of this research, incorporated prior to inception, and during and after the research was completed. The next section provides the ethical considerations.

5.8 Ethics

The Trinity College Dublin School of Education Handbook (2015-2016, p. 34-37) provided the blue print for ethical considerations for this research and were diligently followed. In addition, CORU, the registration board for SCWs in Ireland, is responsible for setting the code of professional conduct and ethics which I also subscribe to at all times in my work with learners and research participants. The codes mandate that research be undertaken in an ethical manner. Also, not to be ignored is one's own personal stance on ethical considerations provided it imbues all the principles laid down institutionally and professionally. Resnik (2016) stated that there are several reasons why it is important to adhere to ethical guidance in research, most significantly because they promote the aims of research, such as knowledge, truth and avoidance of error. My axiological commitment is one of deep involvement and belief in the value of ethics as will be observable not only in this section but throughout the entire study.

It is perhaps Thomas (2017) who encapsulates a strongly held ethical belief when he remarks that "*Ethics is much more than a practical matter-it is about the conduct of your work*" (p. 36). Another prominent ethical belief is mirrored by The ESRC (2012), when they convey that "*Research ethics refers to the moral principles guiding*

research, from its inception through to completion and publication of results and beyond” (p. 43). In line with the PD module, I believe that I engaged in a mindful ethical approach similar to that discussed by Langer (1989) in at least two ways. Firstly, I was aware of the many different social realities for the participants outside of my beliefs, and secondly, I was alert and present in each moment the participant was in attendance at our interview; that is just before and just after the interview when I believed the participant to be at their most vulnerable. I allowed the participants time to say anything they needed to say. This was achieved by allowing sufficient time between interviews should the participant wish to spend time addressing anything related or unrelated to the interview. I was also mindful that participants may have come off shift and, where possible, provided water, tea/coffee, and biscuits, which aimed to provide a welcoming and nurturing atmosphere.

Understanding and being mindful of what that person “has lived through” (Girogi, 2009, p. 122) and being able to care for this material in a sensitive manner is a result of my own training and practice including PD facilitation. As Kimmel (2007) confirms, I had an obligation to be respectful and mindful while composing the questions (See Appendices A, B, and C) for these interviews and diary guides. Sensitive topics around feelings and emotions were most likely to be discussed by the participants; in particular, SCW graduates and PE participants may have psychologically suffered during or after the interview if the questions were not composed with this in mind (Kimmel, 2007). This is one of the reasons I did not ask participants to share their biographies or collect the respondents’ email addresses when they uploaded their weekly diary. Moreover, I wanted to be as inobtrusive as possible. Another ethical consideration is informed consent which is the focus of this next sub-section.

5.8.1 Informed consent

The ethical considerations included participants being made aware of the potential benefits and risks, the importance of informed consent and confidentiality (Polit and Beck, 2017; Vindrola-Padros, Martins, Coyne, Bryan and Gibson, 2016; Matthews and Ross, 2014). As with all research, there were a number of basic considerations that were taken into account before beginning the research, as outlined by Willig (2013). One of those considerations included Informed Consent which ensured participants were informed about the research procedures and gave their consent to take part before any data was generated (see Appendix E). I ensured similar information was

provided on the information sheet and consent form to ensure that if it was missed by the reader on the consent form, it might be noticed on the information sheet and vice versa. I was conscious that I had the trust of many of the participants which might impact on the attention participants gave to the consent form.

Assimilated from their undergraduate studies, most participants/respondents were cognisant of their right to withdraw from the research process, both their consent and participation. I reinforced this message verbally and in writing (Gaudet and Robert, 2018; Guest, Namey and Mitchell, 2013; Chwang, 2008). Participants/Respondents were reminded that, upon reflection following the interview, they could and still can, withdraw from participation at any time without explanation or fear of consequences. I was extremely vigilant to explain this in person to respondents, in particular around the diaries, as this was a new experience personally and for the respondents with regard to diaries for research.

Participants/Respondents were made aware of why the research was being conducted and when they could have access to any publications arising from the research. In addition, I debriefed participants after the interview by asking how they found the experience and I also followed up within the week with an email expressing my gratitude for their participation in the research. This contact assisted me to hold my participants in mind following the interviews, similar to the tenets of psychodynamic and humanistic theories discussed in previous chapters. It was important that I did not just grab the data and disappear. I upheld confidentiality by emailing participants and respondents by utilising the bcc email function (Ryen, 2016; Roberts and Priest, 2010). Confidentiality is the focus of this next sub-section.

5.8.2 Confidentiality

Confidentiality is central to upholding ethical principles. Participants were assured that personal identifiers would be removed or changed from the written data and presentation of findings, which is aligned with Frost's thinking (2011). Perpetual confidentiality of all information collected from all participants/respondents will be ensured (Denzin and Giardina, 2016; Thomas, 2013; Munn-Giddings and Winter, 2013; Davies, 2007; Sieber, 1992; Diener and Crandall, 1978).

Personal and professional biographies were formulated from the interview data, however after careful consideration these biographies cannot be provided for a

number of reasons. Even though participants received a copy of the transcript to make any changes that they felt would reduce the likelihood of being identified, that responsibility is mine alone; Munster as a region is quite a small, data was generated within only three counties of Munster, namely, Limerick, Clare and Tipperary and when the research is concerned with only one profession within those three counties, the risk of being identified is high. Participants/Respondents are easily identifiable by phrases particular to them or through the mention of their client group. I found it necessary to either remove or change some details of client groups for the purpose of protecting the identities and confidentiality of not only participants but other staff members or individuals worked with, that were alluded to during the interviews. Furthermore, this is to prevent participants being identifiable to former PDG members, classmates and lecturers.

I have redacted some words in transcripts solely for the purpose of identity protection. I also realised some of the pseudo names provided by the participants would not prevent them from being identified. Another liberty necessary was to provide some male pseudo-names to female participants/respondents and vice versa. Some participants and respondents chose to tell colleagues and SCW friends of their participation, as is their right, but I am determined to protect all the respondents' and participants' identity, not only on paper, but in the manner in which their data is stored. Data storage is the focus of this next sub-section.

5.8.3 Data storage

Before data analysis began, there was a much needed systematic, coherent process of data generation, storage and retrieval. Storage consisted of firstly, audio recording participant interviews on an iPhone recorder app and a Samsung Galaxy tablet recorder app with the participants' consent. Once it was clear both devices had recorded the interview, the iPhone recordings were deleted, as the phone was most likely to be left unattended and those recordings on the Samsung galaxy app were immediately forwarded to a password protected Dropbox account, set up for this purpose, and linked to my TCD email account. It was then deleted from the Samsung device and transcribed at my earliest convenience and also password protected.

The audio will not be deleted from Dropbox until the thesis is examined in 2021. The diary entries were received into my secure TCD email account and the google

spreadsheet generated was password protected and not viewed in a public place. All passwords were generated and stored on a secure passwords App called LastPass. This ensured passwords were not obvious, reused, or discoverable, since there was a secure record of them without having to write them down. The data will only be retrieved when I am alone in either my home, work office or when with my supervisors. The participants have consented for their data to be used for other possible research related writing and publications and are aware their raw data will be destroyed within two years of the study being examined to facilitate further writing. This includes transcripts but also the project will be deleted from MAXQDA. Reflexivity is the final topic under ethics and the focus of this next section.

5.8.4 Role of the researcher [reflexivity]

Reflexivity has been mentioned throughout this thesis and is added to the characteristics of trustworthy research (Williams and Morrow, 2008). Reflexivity in this research was the practice of being self-aware of my own beliefs, values and attitudes (Bryman, 2016; Payne and Payne, 2004; Patton, 2002). Reflective diaries were maintained for the duration of this research. Mindfulness according to Langer (1989, p. 79) encourages the “*de-automatization*” of our thoughts and actions. As Chodron (2004) reminds us, it was necessary to be aware of what I was thinking, feeling, saying, and doing in each moment. For instance, I checked if making tea/coffee was a way of distracting myself while awaiting participants to arrive for interview or did I genuinely wish to provide a warm nurturing environment from which to convene the interview.

Allowing sufficient time between interviews allowed time to process the previous interview and check in with myself around my feelings around meeting the next participant especially if they were unknown to me. Thich Nhat Hanh’s teaching provides further grounding for the use of mindful ethics leading his teaching to be compared by sociologists to the sociological imagination (Tamdgidi, 2008). This allowed for greater awareness and appreciation of and towards participants. Adorjan and Kelly (2008) identify this practice as an important step to avoiding harm to participants. Additionally, prior, during and after the interview phases of data generation, I engaged in professional supervision, specifically around my own beliefs, values, and attitudes around PD, SCW and most importantly the participants and the interview process itself.

Since the aim of choosing semi-structured interviews was to “*stimulate reflection and exploration*”, it seemed a perfect fit; there occurred a coinciding reflexivity, the participants are reflecting retrospectively and I am reflecting on the impact I am having on every aspect of the research but most importantly, the impact I may be having on the participants and they on me (Davies, 2007, p. 29). This mirrors the PDG facilitation techniques addressed in chapter three. According to Davies (2007), this approach is often concerned with participants’ feelings and can lead to significant advances in understanding the topic under investigation; and I would go further by suggesting those advances are even more significant when reflexivity is central to the interview and analysis process. Balance between reflexivity and subjectivity was briefly discussed earlier and in section 5.6.1, 5.7.3 of this chapter. To elaborate further on those sections, balance between reflexivity and subjectivity refers to the balance between what participants say and in what way the researcher infers the meaning of the words. Speaking the same language as participants relied on that reflexivity and subjectivity to be a constant companion during both data generation and analysis and on in to the discussion and conclusion chapters; thus creating a sense of balance.

According to Williams and Morrow (2009), such a sense of balance relies on reflexivity and subjectivity. Bracketing of any contributions I made to the data was warranted to maintain this sense of balance, in addition to maintaining a reflexive journal throughout the research process in order to continuously acknowledge and manage my own biases. Comparable to Alvesson and Sköldberg, (2000) views, it is possible that this mode of reflexivity provided an avenue from which to view this research, emphasising my role as an active learner who can tell the story from the participants’ and respondents’ view rather than as an “expert” who passes judgment on participants’ answers. Finally, to aid reflexivity, I took a nine month PD class to mindfully observe PD from the learners’ perspectives. Yet, regardless of trying to design and implement the best research approach and methods to answer the research questions, limitations are likely to exist. Limitations are the focus of the final section of this chapter.

5.9 Limitations

In this section, I will consider the methodological limitations of the research design. Focus groups may have added even more depth to the study but it became clear with the difficulty of forming focus groups for the pilot study that focus groups could cause distress due to the nature of the topic. On paper, focus groups would have mirrored

the PDG process. However, it became apparent from the pilot study interviews that participants were providing deeply personal experiences and feelings during the interviews; thus focus groups may have been an unsafe space for the participants, since unlike PDG, there would not be any follow up or processing of feelings or experiences evoked during the focus group, nor could anonymity or confidentiality be promised or guaranteed.

Another limitation was not having any prior knowledge of MAXQDA. I was learning as I proceeded with the coding, comments, and paraphrasing. This limitation did ensure caution that nothing was overlooked. Google forms as a research instrument was slightly problematic but non unsurmountable.

5.10 Summary

The purpose of this chapter was to critically discuss the research methodology adopted for the study. Within this chapter, a methodological overview for evaluating the role of the PD module for SCLs in HE, SCWs and PEs was provided. This chapter began with a summary of the research and an outline of the research questions. The research approach was then laid out and a methodological framework for this practitioner-based study followed with a sketch of the theoretical framework identifying the qualitative research methods adopted and the reasoning behind why they were deemed the most appropriate. Data generation and generation techniques were then outlined. Ethical considerations followed in addition to how the generated data was analysed. Considering the limitations completed this chapter.

The next chapter, the first of three findings chapters, will provide the findings from the analysis of 21 SCW graduate semi-structured interview transcripts.

Chapter Six: Findings from SCW Graduates

6.1 Introduction

The previous chapter provided an account of the research methods and approaches deemed appropriate to answer the research question and sub-questions: “Is the PD module from LIT SCW HE programme relevant and beneficial for SCLs, SCWs and their PEs?”

- How are PD, SCW and PEP defined, conceptualised and operationalised?
- How do participants and respondents articulate the content of their learning and their experience of PD as a pedagogical and practice process?
- What role, relevance and benefit, if any, does PD have in SCW education, PEP and SCW practice?

Participants were introduced in the previous chapter and detailed descriptions of the data generation and the data analysis process was provided. Ethical considerations were also outlined. This chapter is the first of three findings chapters in which the findings from the DA of the SCW participants’ interviews are conveyed. In the second findings chapter the findings from the DA of the PE participants’ interviews will be provided. The third and final findings chapter will outline the findings from the DA of the respondents’ diaries. The findings will then be discussed following the third and final findings chapter.

Presented now are the findings from the DA of the semi-structured interview transcripts of 21 LIT SCW graduates working in SCW practice. Within this chapter, the following five themes emerged and will be chronicled in this order:

- Theme 1. SCW learners’ experiences of PDG
- Theme 2. The Contribution of PD to SCW Learning
- Theme 3. Elements of PD learning transferred to practice
- Theme 4. SCW practice with and without PD Learning
- Theme 5. Psychosocial responses to PD/PD Relevant and Beneficial.

6.2 Theme 1: SCW Learners' Experiences of PDG

This theme contains SCLs experiences of PD during their four years studying for their B.A in SCW at LIT. Generally, this theme demonstrates SCLs initial struggles engaging with PDG. Facilitation and the perceived relevance and benefits of PD are also outlined under this theme.

PDG was the most significant part of the participants' PD learning. Many participants', for the most part, spoke of their experiences in group alluding very rarely to something from the lectures. It was Pippa whose view was comparable to the majority of participants when she remarked that *"the group work was nearly better, but was definitely more beneficial"*.

At the outset of PD, Cathy recalled being guarded about the idea of PD. She explained her thoughts about PD when she stated

Oh my god, they want us to sit down and talk about our feelings. And our families, our life stories." I'd say we were guarded for a long while and then we start to get to know each other.

Five of the twenty-one participants engaged with and/or enjoyed PD from the outset of their PD journey, yet, sixteen did not fully engage with the PD module in 1st or 2nd year. In Eddy's case, he recalled not taking anything *"tangible out the 1st and 2nd year but the 3rd and 4th year there was a lot"*. For many, particularly Kitty, Rose and Chloe, this reticence to engage with PD mostly arose from fear and lack of understanding around what PD entailed. Kitty talked about *"going in blind"* to PD because she had never encountered anything similar to PD before.

Also, some participants were unsure where the boundaries between PD and counselling lay or how much to share with the group. As John Ryan explained *"you hear peoples' stories, they say it turns into to counselling classes"*. Ann was of the opinion

it is just a personal development group and counselling is an in between whereas other people might just need to be clear what it is and that's where people struggle I think with knowing what to say and how much to say and comfortable to say it.

Rose for instance stated *"First year it was a total new concept, cause I think I didn't understand the boundary between personal development and counselling"*. Chloe

experienced the first three years of PD but particularly 1st year as *“Really, really difficult”*. Siobhan T recalled not engaging in PD for the first *“two or three years of PD”*. *“The point or meaning of it”* were outside Siobhan T comprehension. Siobhan T remembered *“it was only in fourth year I really kind of got the benefits of PD”*. Similar to Siobhan T, a small number of participants were reticent for the 1st, 2nd and 3rd year of PD. For instance Molly and Diarmad shared similar views. Diarmad reflected as follows:

what am I doing here looking at 9 other strangers and a lecturer all saying talk about how you are, how was your day? I thought it was fucking ludicrous as it is you know...when I first came into PD, the first year, first day I would never have talked and thought this was a load of shit...I suppose we were like closed books coming in and then as time went on the book was opened, gave it a go.

Ann explained how at the beginning of her PD learning she was very quiet and had very low confidence. Ann also observed she was a very shy person who could not open her mouth to speak in PD but now the very opposite is true. This quote from Ann illuminated her experience of PD

I love groupwork and I love anything therapeutic, I love all that and I know I did, but at the time I hated it because I had to talk about me and I didn't want to, I wasn't ready, it was constant anxiety in my chest I do not want to talk here, what am I going to say, you know, waiting for my turn, terrible so but the other side of it it's brilliant now.

Facilitation

The role of facilitation was important to a number of participants. Shaun Óg believed that once the group *“settles”*, it is the group running the group and the facilitator takes a back seat until it is necessary to interject and steer the group back on course. Looking back, Rose recalled that emotionally and physically, facilitators providing activities that looked innocuous and straight forward but that these activities were designed to assist the PDG member *“take a deeper look at themselves”*. Rose experienced different facilitators from those who were emotionally and physically present in the PD room, to the other extreme, where a facilitator would leave the room and leave the group to work alone. This approach caused Eddy some angst. He experienced facilitation where the facilitator regularly left the room and it seemed to Eddy as though they were never emotionally present. Eddy found this difficult as he believed, particularly 1st and 2nd year learners, hesitant to engage, get their cues on

how to participate from their facilitator, modelling how to be in PDG. Moreover, their verbal and non-verbal cues are also important for PD learners to know if they are engaging in PD as they should. Siobhan T was also of the opinion that the relationships the facilitator creates with group members the more likely PD learners would be to engage with PD. Ann noted, just because a facilitator is adequately trained does not ensure they will be interested or encourage learners to develop. Ann also remembered how difficult she found life story work, but without the help of a supportive facilitator, considers it unlikely they would have successfully completed 4th year. Ann explains how they had

a fantastic facilitator and supportive and who actually took the time to listen to me and talk to me before it, then I don't know if everyone would have benefited from it the way I would have.

Similar to Ann, Kim Kardashian admitted she too would not have graduated if it was not for PD and the way the facilitator supported her on her PD journey. Rich believed the facilitator was most relevant in 4th year when life story took up a large proportion of the year. Learners required a facilitator they could be comfortable with, someone with a quiet and calm manner. Rich acknowledged her group were lucky to have had such a facilitator. Above all, Pippa valued being treated as an individual and the positive relationships that were formed. Furthermore, in PDG there was not an obvious hierarchy between learner and facilitator, there was open and honest communication without judgement. Anna was pleased with the facilitators they encountered and was glad not to have encountered others. As Duke understood PD facilitation, a lecturer is not necessarily required, yet, what is required is someone who can

talk to you and listen to you and tease things out ... like the whole idea I suppose of personal development like you are not going to teach me something you kind of have to let me learn that by myself.

Mary provided an opposing view and argued that engaging in PD is a personal choice and not dependent on facilitators or their style of facilitation.

Relevance and benefits of PD experiences

All participants found PD relevant and beneficial in their 4th year, many regretted they had not taken PD more seriously in the previous years. This is apparent when John Ryan explained

....so I gave it a go and obviously it took me a long time to be honest with you, it was nearly the four years before I kind of fully opened up to PD. I suppose ...I can say now, [REDACTED] you were so kind of stupid not to have even opened up.

Participants acknowledged how 4th year PD consolidated their entire PD experience and was relevant to them both personally and professionally. Kitty explained her feelings around not wanting to engage with PD as she was new to the concepts of PD. Never having encountered anything like PD before, Kitty asserted that she *“really didn’t want to do it”*. Kitty also went on to affirm when and why PD became relevant for her *“I think fourth year was the most relevant, definitely for me... I realised why I wanted to be a social care worker.”* Kim Kardashian confirmed 1st and 2nd year PD were not fully understood as the concept of PD was elusive but she went on to say *“I’ll be 100% honest here. My aha moment, when it really sank in, was when I was going into fourth year”*. Rich, similar to Kitty and Kim Kardashian, stated *“I have really enjoyed the (4th) year so much and I just feel like I have benefited so much from it”*.

Similar to the majority of participants, Rose explained how she completed PD as a person who is more reflective, more observant, listens a lot more and she tried to understand as much as she could around relationship building. Despite, initially, being *“wary, guarded, daunted and sceptical of PD”*, overall, PD was an enjoyable module for most participants. Majella notes *“I know a lot of students loved it, do you know, I did anyway. I think that, this is the only course in the country, so that has to say something for itself”*. Pippa recalled how 1st year was so new and such a different experience to anything previously experienced. Pippa recollected how PD resonated with her

Looking at how you view yourself and then and when you retrospectively look back on that time in PD and see yourself differently now and how the group saw you.

Also, from 1st year to 4th year there was a significant difference in how Pippa viewed herself. This compares favourably with Eddy who explained, in terms of his self-awareness, he went *“from zero to about 80%, the knowledge that I could best use...”*. As the outset of PDG Kitty over compensated by being giddy and chatty and sometimes tried to be the centre of attention. By 4th year, Kitty recalls how those tactics were unnecessary as she was no longer shy or self-conscious. Kitty believed she definitely grew as a person. Some participants, particularly the mature learners had

views similar to Guinevere as she explained when the importance of PD began to resonate with her, she was in the middle of 2nd year and she revealed

how I was actually, I was getting stuff out of it that I didn't, it was that I was getting revelations and stuff and I think it was like it was preparing me for the real world, in a sense that I was getting all my insecurities out for when I went into work.

Guinevere noticed that when she started “*giving more*” to PD it culminated in her “*getting more*” from PD. She estimated it was 3rd year when PD “*just kind of all started falling into place*”. Many participants acknowledged that it is only after PD when they realised the full benefits and relevance of PD. As Diarmad stated

you don't understand the effect it is going to have on you for the rest of your life. What you will learn there, and I learnt a lot in there, in a way that you wouldn't inside in lecture of over 120 people or tutorial of 25 people without a shadow of a doubt.

Kim Kardashian echoed a number of participants when she acknowledged

And honest to God, if it wasn't for personal development and for [REDACTED], I would not be here. I would not have graduated, I wouldn't be in the job that I am in now. I think PD probably saved me.

All participants echoed Cara when he recalled “*it ended up it (PD) was just great...*”

Participants outlined under the subsequent themes why they felt PD was relevant and beneficial to them personally and professionally.

This theme outlined participants' experiences of PDG particularly around facilitation and the perceived relevance and benefits of their PD learning experience to them.

Theme two follows and looks at the contribution PD made to SCW learning.

6.3 Theme 2: The Contribution of PD to SCW Learning

This theme focuses on the contribution of PD to SCW learning. On occasion, both SCW learning will be inseparable from SCW practice. Facets of SCW learning pertinent to PD learning will be provided below. Facets such as RP, triggers, supervision, self-awareness, self-care and PEP will be provided.

All the participants outlined how PD contributed to their SCW learning. This was commonly only discovered once the participant had graduated and entered practice,

hence, the entanglement of SCW learning with SCW practice. Also presented are three surprising elements of PD learning. Firstly, PD learning was transferred to SCW learning and to practice which will also be revisited under Theme 4. Secondly, PD learning was transferred to SCW learning around supervision. Thirdly, PD learning was not considered to have any relevance for the 1st PEP and only minimally relevant for the 2nd PEP and this was often discovered retrospectively and once working in practice,

Diarmad explained that PD is where the life experiences are examined and that books and lectures on theories and tutorials are not where you are going to learn what you learn in PD. Without PD, John Ryan stated it would be impossible to do the work he is currently engaged in, with individuals who have been incarcerated, have mental health issues and/or addiction issues. This is, in part, because John Ryan recalled some of the stories he hears as part of his practice. Everyone encountered, according to John Ryan, is different to the one before and the one after. For instance, if they were talking about death in their family, that could trigger something for him but now he knows to expect that it will trigger him and he is now more aware that this could happen. This is how John Ryan articulated this point

I felt if I hadn't done PD I wouldn't be able to do the work that I'm doing at the minute. Some of the stories they would even be saying to you even if it's death in the family...as I said everyone who comes in the door is different yeah so they all have their different stories and it could be one thing that would trigger something for me.

Louise noted how PD learning alerts one to their triggers before entering practice and stated *"It's a way of learning from your triggers and to personally develop. It's amazing, yeah"*.

Pippa remarked how PD helped her develop the self-awareness to identify her triggers and what affects her and in what way. Pippa also credited PDG work as a big part of her SCW learning and how she brings that into her future employments. As a result of engaging with PD, she became more comfortable and more confident in her ability as a SCW. Majella, like many of the participants, claimed PD had huge relevance and noticed that she became more resilient in her practice. Molly noted the comparison between opening up and sharing with PDG members and how that experience has now transferred to her supervision experiences. Shaun Óg and Rich mentioned how they use PD every day in their practice. For instance, Shaun Óg explained how he

realises he has to self-care and he is consistently checking in with himself around what is going on for him. Shaun Óg emphasised the importance of PD when working with young people in SCW practice. This quote illuminates Shaun Óg's thinking when he stated

And invariably, I do use it (PD) in my work and I use it every day. I am aware around stuff do you know what I mean? When you go out there and you are in working environment you really need it (PD).

This was echoed by Rose when she praised PD for her awareness of when she is becoming overburdened or challenged beyond her limits at work or as she phrases it, knowing just *"how your pot is just so empty"*. Eddy, similar to Rose, attributed PD learning with the knowledge he now possesses that can be best transferred to his practice. This includes self-awareness about his own self, gained from PD, PD in terms of understanding how and why he perseveres with issues, challenges and how he addresses them, in terms of his interaction and overcoming different situations. Without PD, Eddy stated

I wouldn't lie to you, I wouldn't be where I am in terms of reflection, in terms of enabling myself and in terms of planning so I'm in a place because I did those things so it has kind of facilitated me as I say taking that 15 minutes break for myself between clients.

Without PD, Eddy went on to explain, he does not believe he would have had the mindset that was instilled in him from PD for checking in with himself which he found to be of enormous benefit to him, due to the high pressures experienced in his current role.

Chloe clarified how her RP from PD, particularly in times of crisis, is beneficial. Chloe acknowledged the importance of being acutely aware of how she is feeling, why she is feeling that way, what is it that is triggering her. Chloe explained the importance of this for her practice; in order to hold young peoples' emotions, it is vital that she is aware of what feelings and emotions belong to her and be capable of side-lining those and be emotionally attuned and available for the young people in her care. This is how Chloe articulated the importance of PD to her practice

So I have to do my reflective practice, especially in times of crisis I need to be very much aware of how I'm feeling, why I'm feeling that way, what is it that's triggering me, ... Because I need to be able to hold their emotions, I need to forget about my own, so it's a very big part of my work anyway.

As Cathy explained, PD learning remains with her; the ability to incorporate RP and discover when it is necessary to take some time for herself and she outlined

...it is a good learning tool to use no matter what job in the social care field you are in because there are issues that come up. You just need to be able to be equipped in knowing how to best approach situations as a professional social care worker.

Ann was of the opinion that because PD significantly helped her personally, it in turn helped her become, from her perspective, a competent SCW. First, Ann harnessed the empowerment from PD personally which is now invaluable to her as a SCW. As Ann stated *"I was empowered, embraced like that, you know PD is a big part of me now that really were I feel like I personally developed and can help me in my job now"*.

Supervision

The contribution of PD learning to supervision was raised spontaneously when sixteen of the twenty-one participants demonstrated their understanding of the importance and benefits of supervision to them as a result of engaging with PD. Shaun Óg was disheartened with the meagre availability of supervision in his organisation. Supervision is provided on request in Leinster and he works in Munster. Shaun Óg, as this quote explains, relied on what he learnt from PD when supervision was unavailable.

Big happenings in the company and HR look at if you need a bit of supervision, drop up, it's up in Dublin, the company is from and I work down here. I was working down here, and only for PD.

Siobhan T recognised the similarities between PD and supervision and noted the adjustment to supervision is easier for those with PD learning. Also PD journaling has transferred into both her and Anna's supervision. Siobhan T explained

The supervision is a big thing. I think because I know what I need to talk about in my supervision. It's not as daunting sitting down with just one or two people in a group. Because you've had that experience with the groups, it taught me confidentiality ... and respect in the room ...when there's other people talking was a big thing. It (journal) is something now I'm using in work. If you're coming in and out of work every day, you're not going to remember what's happening. So it did teach me to write little notes at night that I know, I'll bring that up.

Cathy remembered check-in from PD and how there is scope in supervision for check-in. Having engaged in PD, Guinevere knows insecurities and triggers will pop up and ensures she has someone to talk to and utilises supervision for that purpose. Louise, Cara and Kitty saw the formal and structured ways they use PD, particularly, through supervision. Louise noted *“in the formal or the structural ways of how I would see PD is through maybe supervision or that kind of aspect of things”*. Cara built on this when he described how he engages *“whole heartedly”* with supervision as a result of his PD experiences and he recognises good supervision whereby he likes to be challenged and views criticism as constructive. This is how Cara articulated his connection between PD and supervision

so I was getting supervision and it was really really good supervision...you were set challenges for you to develop and grow too. And PD ...was doing that more focused look and I suppose to be honest in other jobs you wouldn't have that really good supervision. In other places it's more of a personal chat but this was real supervision.. you know going in (to new role) where I was more aware, felt I really benefited from PD and then throw myself into supervision and work with the challenges you know, criticism is constructive...

Rose utilised supervision as her outlet to explore and deal with any arising issues and or feelings in a manner similar to PD. Likewise Kitty contended that whilst she may not think she is thinking about PD, it is important to her in her everyday life, when she works and especially during supervision with her manager. Similar to PD experiences she talked about how a particular situation has affected her, how has working with a certain family or person affected her. Whether it is neglect, or sexual abuse or something equally difficult, she will still explore in supervision how the work has affected her.

Practice education placement

For the most part, the participants did not consider PD learning relevant or transferable to their PEP. Generally they did not see any correlation between PD and their first PEP. As Molly recalls

first one, I think, it (PD) wasn't as important then, because I think we were so focused on getting the hours done. So at my second one I think I was a bit more aware

Eleven participants saw the relevance of PD to their 2nd PEP. This relevance could have been during the PEP, but for the most part, this relevance was noticed retrospectively and not at the time of their PEP. It seemed the more difficult the PEP the more likely it was that PD would have benefit and relevance to the participants' PEP. This is something both Guinevere and Eddy realised. For instance Guinevere stated

I think what helped me, in my second placement with [REDACTED] was supervision because I was able to vocalise that I needed more supervision for someone who had dealt with [REDACTED] in her own personal life and then going in there that if I had any triggers or anything like that I was able to go to my supervisor. All that came from PD and the importance of it and that's... when I first started, I suppose seeing it rather than hearing it.

Eddy recounted his experience with both PEP's. The less challenging PEP from Eddy's perspective did not require PD as he stated

the one that had the most relevance big-time was [REDACTED] because I did my two placements, one was [REDACTED] in disability and one in [REDACTED]. The [REDACTED] one I had already had experience dealing with them so I know about what it entailed so, it wasn't much, it wasn't much of PD because it wasn't that intense while I was there on placement.

Kim Kardashian explained how PD was relevant to her during her 2nd PEP. Having PD learning prevented Kim Kardashian from being judgemental and inserting herself in a situation without first stepping back and asking why and how questions. As Kim Kardashian stated

It made me question the why and how can we help, rather than, this person was bad, it made me sit back and go, "Okay, there has to be something else going on. This person is going through something in order to create this, so it made me personally sit back and then discuss with the people I was on placement with, how we can help, how we can move forward. I think we in the end dealt with it very well, but if I hadn't been doing the personal development, I could have been in the position where, "That's just wrong.", and given up on the girl. So, I think for that it helped me a lot.

This theme focussed on the contribution of PD to the participants' SCW learning. The main thrust of this theme was how PD learning assisted the participants as SCLs and as SCWs for supervision and how PD learning is heavily relied upon until supervision can be accessed. PD was not seen as having relevance for participants' 1st PEP, however, it was seen as being somewhat more beneficial and relevant to their 2nd PEP, and particularly, if it was an intense PEP. This was often only discovered

retrospectively. The focus of this next theme is on the elements of PD learning transferred to practice.

6.4 Theme 3: Elements of PD Learning Transferred to Practice

This theme focusses on the elements of PD learning transferred to practice. All participants specifically articulated that, following qualification, PD remained with them personally and professionally. Supervision mentioned in the previous theme is also relevant to this theme. First, a general overview of the participants' expression of elements of PD learning transferred to practice. Thirteen sub-topics developed within this theme but only six will be outlined and expanded upon in depth. Triggers, contemplative pedagogies, self-care, assertiveness, self-awareness and RP are the most significant sub-topics from the participants' perspectives.

Cathy acknowledged the benefits of PD learning to her practice when she asserted that issues arise either for herself or the individuals worked with and having PD equipped her to know which approach to the situation might work best. Molly equated PD learning with understanding how the individuals worked with are possibly experiencing the interventions in the same way PD, at the outset, was experienced, with similar feelings and emotions evoked. This quote from Molly highlights this when she expressed how *"it really kind of puts you in perspective of the clients you are working with as well, we know how to be on the receiving end of PD"*. Mary explained, in the following quote, how elements of PD learning assisted her personally which in turn are now used to de-stress and relax.

it would have relevance... it would have relevance especially in this line of work, it can be stressful at times so its a way to de-stress and a way to relax I find that those techniques that we had used in our sessions were very useful for that.

Louise credited PD with enabling her to connect with people but also around how she views her own values and how they feature in her work with addiction and homelessness. Louise confirmed

The biggest thing that PD does for me in my daily work life, is allows me to connect with people. I think it is I suppose very much of how I view my own values and how I bring that to my work. I think that's what PD, where I see it, very much so. I suppose in my daily work it'd be certain kind of instances (where PD features). I suppose where you have to be creative, I think. You

know, social care, it's so dynamic. I suppose things can change quite quickly. You have to be quick on your thoughts.

Louise followed this up by explaining PD transferred to practice by teaching her how to ask “*how*” questions such as

how do I be a better worker? How do I be a better colleague? How do I promote or encourage for a better service? What do I do here that is promoting or encouraging somebody to access their personal development, I suppose? And I think that's very much how personal development comes into it.

Diarmad explained that before PD he viewed relational work issues or any struggles as weaknesses but since PD the opposite is now true. He opined

you know I suppose you would look at it from my own perspective like you know relationships and things and things at work, having a problem could be seen as a weakness you know before PD.

Anna recognised she was making comparisons between a family member and a colleague and as a result of PD, recognised what was occurring for her, that the colleague was not a family member. Anna explained

I'm sitting here now and thinking of a situation, thinking of member of a my family that brings out the worst in me...And that's what that other person was bringing out for me too and that's who they were for me, so again they actually are not that person in my family. They really are not; they might have the same or might have said something to me. A mannerism or something that...Or they might have said something to me that would have caught me unawares...we've fixed that relationship now.

Kim Kardashian lamented the loss of PD and occasionally, since PD is no longer available, replaces it by attending counselling for a “*top up*” when she notices she is overwhelmed. As she noted

Like if I didn't have personal development, I'd have never been open to even going to a counsellor. It saved me a lot of hassle, and it keeps me grounded actually in work and in my personal life.

Rich attributed PD to her ability to question if she is providing adequate care and also checking in with herself to determine if this is the way she would like to be treated. Rich examines her work from the families perspectives too and ensures treating individuals with dignity is at the heart of her practise. Ann also recognised learning to name her feelings in PD transferred to her practise when she stated

to be actually able to name how we are feeling and be able to say you know I'm feeling shit today and I'm actually feeling like quite good today, feeling like quite balanced and feeling like this then I'm able to recognise it in the workplace

Participants' understanding of the necessity of PD for the personal and professional self is acknowledged when, for instance, Majella stated

I think...it is for ourselves and then our family and then service users, and then the kind of the bigger picture of the world. I think knowing how things work, know how I can vibrate, my vibration can affect the bigger things you know, or even the next person.

Also, Molly and Ann demonstrated their understanding of how elements of PD education transferred to personal and professional life. As Molly explained

I feel that if I didn't do PD back since first year, I would have been a really closed book, I'm a really kind of quiet person. So it pushed me to speak out and I think its taught me in my work life, to speak out and kind of if I have an issue just talk about it, don't think oh it will just go away, cause it doesn't, cause it just builds and builds.

Ann, similar to many of the participants, came to recognise the benefit of PD after they completed PD. They acknowledged that PD learning was a catalyst for them to know when to speak up. Kim Kardashian noticed that she is aware of what is going on for her while engaged in practise with young people and when appropriate she knows she can excuse herself and as she remarked *"it has empowered me to make those decisions and to know when I am okay and when I'm not. In every situation"*.

All participants acknowledged PD is still beneficial to them both personally and in their practice every day. As Ann explained

it really does help me. So you know I have personally developed, I have come on an awful lot, gained so much confidence that it actually helps me to work and to be a much better social care worker because of it.

Transferring PD learning to the personal and professional life is notable when Majella acknowledged the strategies she took from PD and understands how they can be implemented in practice with an awareness of recognising people where they are at. Rose explained how everything from PD which looks at most aspects of the person's life, transforms the person and the SCW. Rose believed *"it would be really hard for someone to come in and be the same person at the end, when you have PD"*.

According to Pippa, PD learning is relevant and beneficial to her in her practice, she outlined how she reverts back to PD daily even though PD is not something that other staff members have engaged in. Yet, Pippa maintains the structure of PD learning for her own practise. PD transferred to her practice in terms of how to manage staff relationships and manage and cope with stressful situations. Supervision is where Pippa observed she can be honest when asked if she is ok, if she has any issues to bring, issues with staff, policies, individuals worked with and even with herself. Pippa stated

Even how the relationship side, how you get on with the staff even it's how you deal with stressful situations... the supervision, that's the time that they do ask you if you're okay, if you have any issues with anything, the staff, with yourself, with the policies, with the service users, everything. It's very relevant.

An unexpected finding was when three Irish participants, Majella, Guinevere and Rich found PD had an unexpected benefit of generating more understanding and acceptance of non-Irish/asylum seeker learners and by default other cultures which has transferred to their practice. As Majella stated, *"I became a lot more accepting of non-Irish people being in our country, because of it (PD). Cause I've got to know them."* Guinevere also stated *"What I found great was learning different cultural backgrounds in PD"*. Rich remembered hearing the life story of an asylum seeker and explained the impact it had on her when she recalled

just getting in the car to go home. I just couldn't face anything after, you know, cause I was so upset for the person ... around that story or whatever. I'd just get in the car and couldn't stop crying, cried the whole way home and then just thought about what an amazing moment. Oh my God.

Duke learned patience in PD and this has transferred to his practice where he learned firstly to be patient with himself and then with the individuals worked with. However, for Duke, the biggest learning from PD transferred to practice has been to question why something may be happening and not having reactionary responses. Duke also noted how PD definitely prepared him for the SCW role he has now as he outlined

the biggest thing from PD though is that it has kind of made me question like why stuff is happening it's not reactionary all the time it's like ... why can't he fucking control himself but it's like okay what made him do this and why is he doing it in the first place...yeah kind of got me ready for the job I am in at the moment. The guy I am working with now he's ... 3 maybe at a

stretch...the patience level and the empathy level has really gone up and my own tolerance.

Cara recognised multiple benefits of PD. He noted PD is a large factor in all areas of his life, most especially, when he has seen the effect it can have and the benefits in his work. Cara acknowledged the positive impact of PD which is now comparable to how PD learning not only impacts on the young people he encounters but also the managers and staff. Cara stated

but for me PD was a big factor in all especially when I've seen it you know the effect it can have, the benefits and how positive it is, then how that will impact on the kids that you work with... the managers and suchlike. It's very important

Cara proceeded to confirm about understanding the personal in PD which assists with being aware and managing relationships and having to look at situations. He now can see the relevance in what PD brings to him as a professional and to his practice. For instance, Cara observed

there was an awful lot more personal stuff around being aware and again managing relationships and having to look at situations ... now I can see the relevance in what it brings to me as a professional and practice and in all that...and if you can manage to do those type of PD sessions with kids it does form closer bonds or relationships that you have with the child the more chance you are going to have a positive outcome

Rose explained how *"everything in PD definitely shapes the worker and maybe on a more personal level as well"*. Other elements of PD transferred to practice and their relevance now to SCW practice which will be outlined in more detail below include:

- Triggers
- Contemplative pedagogies
- Assertiveness
- Self-care
- Self-awareness
- RP

Triggers

Eight participants directly mentioned how learning and understanding triggers from PD transferred to their practice. Kitty also appreciated the necessity to know yourself

before working with people, especially in difficult and high stress situations. Kitty explained how you do not react or allow yourself to be in a situation where you could possibly be triggered. At the very least, Kitty explained the necessity to be aware when a situation could cause one to be triggered. Rose recollected that her younger sibling is a trigger for her around drugs. Rose further explained that due to her working in [REDACTED], it is impossible to avoid issues of addiction and drug use among the young people. Rose explained, *"So I think I found that, I had dealt with it here (PD)"*. If Rose had not dealt with that particular trigger in PD, she believes she would most likely have suffered a meltdown. Siobhan T echoed Rose's view when she acknowledged *"It really does benefit you...knowing before you go into the workplace what your triggers are..."*. Guinevere found PD uncovered her insecurities and triggers and she was prompted to be more vigilant around her triggers and to request more supervision if and when required. PD, according to Louise, is *"a way of learning from your triggers and to personally develop. It's amazing, yeah"*. John Ryan's grandparent passed away a long time ago but it is still a trigger for him which took him by surprise at first during a PDG but now, he too, is vigilant around that trigger.

Contemplative pedagogies and practices

Eddy was surprised to discover the elements of PD education that were important to his practice, particularly the grounding exercises which ensure he is totally present and focussed in every situation he encounters. He recalled how he *"never thought that in my wildest dreams they would be anyway important..."*. Similar to Eddy, grounding herself is also another element of PD transferred to Kim Kardashian's practice. Kim Kardashian also outlined how taking a few minutes to relax and breathe is important, particularly, if it seems panic is likely to arise. Kim Kardashian realised panic and its cause must be acknowledged and a solution sought to eliminate the panic because when feeling panicked it is impossible to work competently. Without PD, Kim Kardashian acknowledged that she would not have the understanding of panic and anxiety and how grounding herself and taking a few minutes to focus on her breathing assists with panic. Moreover, she claimed, she would not have ever become the worker she is now without PD learning. Kim Kardashian also explained how meditation features in her work with young people to this day. Kim Kardashian expressed

To ground myself, to take that few seconds or few minutes or whatever I have, just to breathe and relax and to go, "Okay, you can't start panicking

about it, because if you panic about something, it's not going to work out. You need to think about it. Come up with a solution." So for that I found it very helpful and I've always maintained that. So that's, do you know, without Personal Development I probably wouldn't have ever had that. And I wouldn't have ever become the worker that I am. And that's still very much features in my work with young groups today, which is quite hilarious. And meditation as well.

Guinevere stated that she incorporates meditation prior to home visits and after visits and that she relies on meditation. Also, she finds engaging with meditation and grounding assist her with rising anxiety too. As Guinevere explained "*I found that when my anxiety started to rise, by doing the meditation and grounding myself. It really helped me*". Meditation and grounding are two elements of PD that seem to be frequently relied upon. Mary highlighted that when she engages with meditation at work that the young people will replicate what she does and she has noticed it works for them too. Mary explained "*he did some meditation as well when you were doing it, he'd actually copy what you were doing so it did work*". Louise explained how grounding oneself also prevents reactionary responses.

Self-care

All participants were cognisant of the importance of self-care and aware of the consequences of how not adequately caring for one's self in the SCW profession will ultimately lead to burnout. The contribution PD makes to that knowledge was mentioned by Shaun Óg, who, in his last post witnessed numerous staff resign their posts from the pressure that they were putting themselves under. This pressure included doing things for the organisation and doing things for the individuals worked with, without checking in with themselves. Shaun Óg believed

that comes down to the training they've had like I said a lot of them had to look inside themselves. When you go out there and you are in this working environment you really need it. So, you know, the more it's hammered home to you about minding yourself and looking after you.

Siobhan T remarked how helpful she found the self-care aspects of PD. According to Siobhan T, these self-care aspects were relevant and beneficial from the perspective of knowing before you enter the workplace what your triggers are. Just as important, for Siobhan T, was knowing when one is not coping or getting burnt out. Shaun Óg also observed that PD really does help with recognising when burning out is likely, as

some people just do not recognise that in themselves. Siobhan T provided an example of when she recognises her need for self-care

I know I was very burnt out there Christmas ..., and it was just knowing, look, I need time off. And whereas I know a lot of people did plough through it. And I was, "I will plough through it." But I just need a couple of days just to relax and just not think about this place, you know?

Rose explained how PD helped her become aware of when she feels overwhelmed or challenged beyond what she can manage at work, and she links in with staff members around these feelings. Only when Rose has assessed her ability to be present does she resume her interactions with the young people with whom she works. Kitty builds on Rose's view of burnout and believed as SCW's, they need to continue learning new skills, and it is vital they continue to grow to avoid becoming stagnant or getting burnt-out. Cathy recalled PD is always with her. Cathy stated that bringing PD to mind correlates with when she realises she needs to both think about how she is feeling and take some time for herself. Diarmad recalled hearing in PDG about being good to himself and to give yourself a break and to recognise how well you are actually doing and that has transferred to his practice. Grounding and meditation as self-care strategies transferred from PDG to both Mary's and Guinevere's SCW practice.

Eddy exclaimed how it is almost that his life has been based on PD, particularly around the self-care aspect. Additionally, Eddy believed that if PD had not been provided, he would be burnt-out after only two years in his current role. He further clarified that transferring PD to his practice is majorly beneficial. Eddy considers this to be true because the individuals Eddy encounters in his practice have endured horrendous experiences. These individuals frequently relate some of those horrors to Eddy. Eddy further explained how it is crucial to be capable and knowledgeable on how to look after yourself in order to better assist the individuals worked with. Furthermore, from PD, Eddy is attuned to the dangers of vicarious trauma. He recognised he was under stress and now he ensures he makes time for self-care. He has returned to football, swimming, meditation and ensuring a fifteen minute break between his appointments due to the volume and nature of the trauma he is encounters. This quote speaks to some of what Eddy articulated

I could see the visceral effect it had on me, I had to kind of analyse that situation and kind of go back to what I had learned in PD because always we had talked about vicarious trauma and being stressed from the work. I

wasn't caring for them because I was stressed. I then kind of didn't realise in the beginning because I was so vested in ensuring that they were okay...so if I had to continue like this then I would have burnt-out for sure because I could see the signs, so I had to go back to PD and what is self-care and looking after myself, it is almost that my life has been based on PD in a way especially self-care and if it wasn't for doing PD I would say that I would be by now burnt out.

PD is always in the back of John Ryan's mind, especially around looking after himself, something many participants acknowledge. John Ryan believed PD

it just made me the best that I am today and this is, it is always there in the back of my head whether I like to think it or not, it's there and it is only when things come up that you realise it kind of kicks in, it comes into effect.

Assertiveness

Participants mentioned assertiveness from PD and its application to their practice. Molly is assertive when she asks for help when she needs it. Siobhan T explained how she was not naturally assertive before PD, she was a nervous person and kept to herself, she never spoke up if anything was wrong. Siobhan T claimed she left PD being more assertive and capable of asking for help. Siobhan T went on to say assertiveness *"was the biggest thing I took out of PD"*.

Cathy attributed assertiveness to her ability to voice her opinions. Rose built on this when she noted becoming assertive is where you find your voice and PD was where she began to find her voice and move it forward to her work. Rose works with some of the most vulnerable and traumatised young people in the country and assertiveness is vital to good practice. The ability to speak up leads to better communication and Rose noted that it has to be logged that you spoke up. Rose concluded assertiveness *"is a big piece in social care"*.

Chloe explained how she lacked assertiveness when she began PD but once she began looking at assertiveness in 3rd year PD she observed that it was a lack of assertiveness holding her back and not all the other issues she had been attributing to holding her back. Gaining assertiveness is what Chloe believed led her to speak up for herself and make the decisions she wanted to make. Chloe recognised assertiveness was a huge learning curve for her and one that would be beneficial to others too. This quote from Chloe confirms her thinking as she stated

It was the assertiveness when I was in 3rd year and I'd obviously been struggling with mental health for a long time, and I'd come to the realisation that it was actually my own assertiveness that was holding me back and just not speaking up for myself; making decisions that I wanted to make. So that was a huge kind of learning curve for me. Really one that stood out that I think would be beneficial to a lot of people, you know? I left more assertive.

Similarly, prior to PD, Ann did not know the meaning of assertiveness but she attributed PD with learning the meaning of assertiveness and discovered even if you do not want to use assertiveness you must incorporate it, and she does, in her practice. Ann explained this in the following quote:

I would never have known what assertiveness was and then there is times then when you would have to use it but I didn't. But I learned in PD and what it means like, you have to be able to even if you don't want to, you have to use it, as before if I was in college or anything I wouldn't have done that but now I can do it.

PD is also where Diarmad learnt to be assertive too. John Ryan explained that becoming assertive was a challenge. He did not realise he was learning in PD until he began putting assertiveness in to practice. John Ryan expressed this in the following quote

I mean we did cover assertiveness in PD so even though at the time I didn't think I was learning, it did kick in...I know where that comes from. In the work I'm doing now, you have to be assertive.

Self-awareness

All participants demonstrated that they have developed further self-awareness from PD and how that self-awareness is transferred to their practice. Earlier topics covered have already attested to participants developing self-awareness, what follows are the moments when participants directly mention self-awareness and its transfer to their practice.

Molly remembered the first time she "*articulated*" during PDG that she was not feeling good and how that has carried with her to her practice. Eddy expressed where self-awareness and his self-assessment of feelings from PD resonates with him in his practice; it is around his own privilege, for instance, the way in which he has certain capabilities that the individuals worked with do not. For Eddy

PD had a way for me to look at my inner self and I remember during the Johari window in terms of looking at the ways in terms of looking at something you don't see and other people see so it was helpful in terms of that because it was an eye-opener for me.

Siobhan T believed self-awareness from PD revolves around stepping back and knowing, that sometimes something is not the right fit for her at a particular time. Ann acknowledged, how for her, self-awareness from PD transfers to her practice as she confides that if the young people only knew how much happens in the SCWs head when they are both interacting and not interacting with the young people. This allows Ann to temper what she might say because of that awareness of the manner in which language and body language are used and interpreted. Ann is extremely conscious of, on the one hand, filtering what she says but also of remembering to relax in the young people's presence. Additionally, having been provided with the opportunities in PD to recognise and name her feelings and emotions, this also transfers to her practice. The same is true for Kitty when she reiterated

you do still need to use PD because you need to think, okay, what can I say that's appropriate in this situation? You obviously don't want to say too much, I just think taking the time to sit down and really introspectively look at yourself and others and how your experiences can affect others.

Rich's learning from PD that transferred to her practice includes not reacting immediately or negatively to someone's bad behaviour as she wonders if perhaps there is something bigger happening for that person. She claimed to have more consideration now for what could be actually happening for someone and perhaps it is someone not capable of making the connection between their behaviour and other issues they may be experiencing. Rich has also transferred her learning from PD, to be honest with herself and how she is feeling, to her practice. Prior to PD, Rich explained how she was moving through life not even knowing what she wanted from life or where her life was going. Whereas, now Rich questions if she really wants to be doing something, why is she doing it, does she want to do it and what does she hope to achieve by doing it. Rich articulated some of the above in the following quote

We don't know what's happened to them. So I would hang on and wait and see what's happening with this person first....Before I'd have started saying, okay, maybe you should ...Cause you just don't know what's happening with other people. And then as well, learning to be honest with yourself. Learning to be honest with your own feelings is really, really important and ... I did learn that as well definitely through PD. It definitely did have to do with PD...

Kim Kardashian explained how self-awareness from PD has transferred to her practice of not only being aware of herself but of those she interacts with too. She explained *“being very self-aware and knowing when I am okay, and when I'm not okay, and that's actually made me very conscientious of others around me as well.”*

As a mature student, Anna had lots of work experience before undertaking PD and looking back she has brought her awareness to how she was running multiple tasks simultaneously and micro-managing everything. Since PD, Anna has become aware of the need to hold herself back in the workplace and trust that others can and will complete tasks. She is also aware that busyness is not always necessary to be productive when she stated that she gained her

...own self-awareness around it. And I was micro-managing a lot of stuff sometimes as well... and going forward, this was where I had to hold myself back again and say you want to be mindful of that.

Chloe recognised how dangerous it can be for staff and individuals worked with if staff members are not self-aware. Eddy demonstrated how PD has transferred to his practice. Recently Eddy has begun taking a tea break between appointments in order to analyse in his head how his sessions are going and to take a look at his inner self. He explained

...so PD had a way for me to look at my inner self ...Without PD, I wouldn't lie to you, I wouldn't be where I am in terms of reflection, in terms of enabling myself and in terms of planning so I'm in a good place because I did those things.

Duke explained how self-awareness was his biggest learning from PD and it transfers to his practice when he takes time and checks in with what is happening and why it is happening. Duke noticed how he became more aware of his thoughts and actions as a result of his PD learning. He explained how PD gave him a nudge to question why he thinks the way he does and he moved on from originally saying because *“I just do”*. As PD progressed so too did his ability to break down his thought processes. Self-awareness has been Dukes biggest learning from PD as he expressed

I think that would have been the biggest one for me ...I think I just became more aware of my own thoughts and actions and kind of to some degree why I think the way I do, you just kind of have to do it ... it resonates, it forces you to kind of breakdown your thought process and ... it is very easy to dismiss something as like that's just the way I think. I now think the way I do about certain things that have definitely been helped in PD.

Cara explained his thought processes when he noted

over the 4 years I have just become significantly...much more self-aware and as I keep saying how that would impact on kids and whatever relationships and families and things like that, so I have changed an awful lot that's the one thing that I ...suppose and I know we have talked about in PD that I feel that this should have come about 10 years ago but life got in the way but I just ... feel very lucky to see it and rectify.

Louise believed her PD learning moments arose from speaking with people in PDG and learning about them, and then reflecting on how that differs or is similar to her own experiences which results in lots of reflection.

Reflective practice

RP is interspersed throughout the subheadings within this theme. It has relevance under triggers, self-awareness, assertiveness, self-care and burnout. RP is necessary in order to engage fully with all of the elements of PD addressed under this theme,

Reflection, on and in their practice, is the element most poignant for Guinevere, Cara, Kitty and Anna. Guinevere and Anna noticed how the reflections they continue to engage with improve their practice. Guinevere still carries reflecting and working on herself which are also fine-tuned. Without this reflective ability she believed she may have missed some things that are vital to her competency levels at work. Guinevere explained this when she stated

that the reflection and the critiques that I do with myself now are even making me ...be such a better worker, because I'm able to critique and work on myself, but I'm also able to identify and see things in the home that if I didn't reflect on it ... I'd probably have missed it

Anna believed RP is the reason she is capable of being accountable for her work and RP also allows her to take further learning from her reflections. Until PD, Anna did not consider herself a reflective person stating *"yeah, so PD has been very good; I think though, for me, I never would have considered myself as being a reflective person"*. Rose attributed PD with providing that protected space to reflect creatively and focus on and think about yourself. She goes on to say *"when you have a module that is deliberately, ... timed to think about yourself, there's no avoiding that"*.

Reflection is something else Pippa believed transferred from PD to her practice and suggested PD should be provided to other professions too. PD learning also features

in Cara's personal and work life every day, elements such as reflection and continuing PD. As he explained, if he is unable to promote positive change in himself then how can he attempt to facilitate positive change within the individuals and groups worked with. Cara stated he relies heavily on reflection. Cara reported that he engages in reflection and checking in with himself before he engages with individuals. Moreover, Cara said that he reflects on his previous session with the individuals and families and the learning from those reflections is implemented before he reengages with those individuals or families. Succinctly phrased Cara stated

just sit down and saying right this is what's going on for me, thinking about how the last session went, what could I do better next time, what you know all the different things by the signals that they give you, just reflecting on things before, you know preplanning, planning and then afterwards and how can you do better and try implement it and some of the kids they do take part in some of that too, what went well and stuff, it works you know.

Kitty relies on reflection elements from PD in much the same way Cara does, there is reflection before an encounter to see how an interaction could be best approached and or work undertaken, followed by reflection after the encounter. Kitty explained she reflected on

What could I do different? How has my experience affected how I worked in that situation...It's really important. I think you have to know yourself before you can start working with people, especially in difficult situations.

Pippa recalled being in a very dangerous situation whereby she could not move or react but talked the young person down. Pippa reflected on the event and acknowledged she dealt with it very well which was also echoed by the other staff members. Chloe recognised, and is relieved at, how much she focussed on herself during PD, on her past and present, and that if she did not receive nor take the opportunity to do so she would, in her own words "*be a dangerous social care worker right now*". Chloe proceeded to recount that she must always engage with RP and even more so in times of crisis. She recognised that she has to be very much aware of not only how she is feeling, why is she feeling that way and examine what, if anything, may be triggering her. This, she acknowledged, forms a large portion of her practice as the following quote highlighted

So I have to do my reflective practice, especially in times of crisis I need to be very much aware of how I'm feeling, why I'm feeling that way, what is it that's triggering me, so that I can... Because I need to be able to hold their

emotions, I need to forget about my own, so it's a very big part of my work anyway.

Cathy explained how RP became such a large presence in her practice. She remembered how she took in all the PD learning and was unsure if, or how much, it was relevant to practice. She had no difficulty reading material and adapting it to fit scenarios. It was not until Cathy was a practicing SCW in “*real life situations*” that she conceded she was able to transfer her PD learning to practice whereby she could implement RP. As Cathy stated

until you get into an actual working environment and work with kids and have real-life situations in front of you that you can actually put it into practice and be reflective and how will you actually work with the children.

This theme began with a general overview of the participants' expression of elements of PD education transferred to their practice. A more focussed outline of six sub-topics related to the elements of PD that participants noted were transferred to their practice was provided. These were triggers, contemplative pedagogies, self-care, assertiveness, self-awareness and RP. The focus of this next theme is to impart the participants' experiences, observations and views of SCW's with and without PD learning.

6.5 Theme 4: SCW Practice With and Without PD Learning

This theme considers participants' experiences, observations and views about SCWs with and without PD learning.

Six participants Siobhan T, Chloe, Diarmad, Cara, Shaun Óg and Cathy spontaneously noted how other practitioners without PD training struggled in their practice predominately with burnout but also often lacked self-awareness which led to them not recognising signs of burnout and stress. Siobhan T explained how PD is beneficial and relevant particularly from a self-care perspective. The ability to recognise your triggers, when you are not coping or becoming burnt-out was deemed a contributing factor of self-care. Siobhan T also reported that those without PD often do not recognise these things within themselves as she explained *“when you're not coping or when you're getting burnt-out and it really does help because some people just don't recognise that in themselves”*.

Louise believed PD is necessary, as without it, one can exist on auto-pilot and not engage in RP or self-examination. Louise concluded that operating on auto-pilot can lead to burnout. Louise also believed it is important to allow yourself to feel your feelings and acknowledge and question why you might be feeling this way. This is vital, from Louise's perspective, particularly in SCW, since burnout is prevalent. As Louise explained *“Failure to look after ourselves and reflect and give some time to our thoughts or our feelings will lead to a very short-lived career”*. Kim Kardashian outlined how learners with PD learning compare to learners without PD. Those with PD learning have a more practical approach towards situations and they generally far exceed what is expected of them in practice. Kim Kardashian observed that

...the students that do personal development and have gone through and have the more practical approach towards things far exceed or far excel in their roles. They're able to handle situations a lot better, they're able to come back and talk, and if they see something that they think is wrong, they're able to come and talk. I think it's very empowering, I think it's because of that journey they would have never gotten the confidence to be able to approach people and say, "Listen I don't think... ". I think it makes a huge difference. Huge. So I think it should be rolled out actually for everywhere to be honest.

Without the PD learning, Kim Kardashian believed she would never have gained the confidence to speak up.

Chloe expressed how numerous colleagues do not see the relevance and benefit of PD and have no desire to try and gain PD learning. As a result, Chloe has noticed that her colleagues are often unaware of the stress they are under and can get somewhat burnt-out. As a result of PD, Chloe admitted she is capable of noticing that in others and conceded while PD may not be important to others it is extremely important to her. Chloe stated

I work with people who say, don't see the relevance of PD, who are, I don't care about that, or I don't understand it. I work with people who wouldn't be that aware that actually perhaps they're under a lot of stress and they're a bit burnt-out. I can recognise that in people. I suppose it wouldn't be that important to everyone, but for me it's NB, it's extremely important, yeah.

Cathy also recognised that those who suffer the most burnout have not had the opportunity to engage with PD. Cathy has observed the effects on her colleagues who have not participated in PD. These effects include the deterioration of her colleagues mental health, particularly when they are unable to help themselves in stressful situations. Cathy stated “...*I definitely think one or two didn't (have PD). And you can see that it has affected them*”.

Diarmad and Cara noticed staff without PD are unable to keep the boundaries with the people they work with, particularly around the rules and as Diarmad explained “*well that's it you see, that she (staff without PD) would like enjoy the lads but she wouldn't be able to maybe keep the boundaries so well that she would cave in*”. Cara explained how this is not helpful, since the young people in his care require predictability and consistency. Additionally, Cara noted how it is actually frightening and harmful to their development if they push and the boundaries move. Cara explained what this looks like when he stated

so the kids are very difficult and they want that and sure just staff want to do it all, yet, they are told stick to the rules and to stick to strict boundaries, now we've just broken the bedtime, now they are eating a bowl of Coco Pops which is a bowl of sugar at 11:30 at night and they are meant to be in bed at 11 and that doesn't happen with me...I hate the fallout and a lot of people will try and avoid the fallout but the reason I take the fallout is because I feel I'm trained well enough to deal with it. I've gone through all this the proper way in the personal development.

Returning to Diarmad, he works with staff who have not experienced PD or similar. He noticed when he recognises elements of PD in his work and other staff members do not have that point of reference. For instance, Diarmad is aware when problems arise,

he has learned from PD, it is possible to talk to someone about the issue and express what is going on. Yet, even though the outcome may not change, he does feel better having taken the opportunity to express himself. He lamented, as the following quote highlights

they wouldn't have done PD or anything like it before you know, an even though what we're doing would remind you of a PDG they don't understand what a PDG was or entails and I suppose like that, if I ever have a problem I have learned from PD you can talk to someone and get it out you know, well it might not change the outcome but you do feel better. These people don't understand that.

Participants also acknowledged their ability to transition in to professional supervision as it shared many of the characteristics of PD. However, participants noted providing, requesting and engaging in supervision and even the concept of supervision was difficult for those without PD learning. For instance, Siobhan T shared how a number of organisations do not provide supervision and she explained this further when she stated PD features

because we do supervision. Now I know a lot of places don't do it. I've been talking to people outside and I obviously studied social care, but there's a girl I'm working with and she didn't understand the concept of supervision and us talking and kind of like PD, like what we used to do in PD.

This theme focused on participants' observations and views of SCWs without PD learning. Not having PD learning was viewed as a deficit for one's mental well-being, practice and ability to keep the boundaries, self-care and avoid burnout. The next theme focusses on the participants' psychosocial responses to PD and also outlines whether PD is relevant and or beneficial for SCWs in their practice.

6.6 Theme 5: Psychosocial Responses to PD/PD Relevant and Beneficial

This themes focusses on participants' psychosocial responses to PD and expands on the relevance and benefits of PD experiences mentioned under Theme 1 and considers whether PD is relevant and or beneficial for SCWs in their practice.

Participants rarely distinguished between personal and professional elements of PD and saw the personal and professional as intertwined. Cathy, Molly, Ann, Diarmad, Louise, Kitty, Cara, Anna, Kim Kardashian, Rich and Pippa believed that, following qualification, PD remains with you personally and professionally. As Ann outlined

on a personal level it's helped me with an awful awful lot, so I really do feel that that's what is actually making me a good SCW, it means that I have dealt with my shit because I had to, to be honest, and I did and if I didn't do that I don't think I'd be in the position of the job that I was offered. PD is a big part of me now, that's really where I feel like I personally developed and can help me in my job now.

It transpired that if the participants' personal life was under strain or had unresolved issues such as family and relational issues, then, if they remained unaware, this would be mirrored in their professional life. Yet, it is observed that the self-awareness gained from PD afforded participants the aptitude to check in with themselves prior, during and after encounters with individuals in their practice. Cara and Kitty elucidated this point when Cara explained

for me, it is every day, as much as you can, even after every session before or especially even some of the cases that you would be working on, I mean some of them can be very intense and you're working in various jurisdictions...and it's like on the way, on the drive up, I'd stop,... get a coffee and just sit down and say right, this is what's going on for me.

Kitty highlighted that when you're involved in highly stressful situations

I think you really need to be aware of yourself. And I think it's very important in situations like that, because, as I said, you need to be composed, you need to be looking at yourself. I think as the years go on, you know how valuable it is, and to take that hour outside of your crazy busy schedule to reflect on things that you probably wouldn't usually reflect on. And look back at your family, and maybe look at things that, you know, maybe you've had trauma with or difficult experiences"

At the outset of PD, five of the six male participants were reticent to engage with PD for similar reasons as the female participants, but there was also an added chasm to negotiate based on their own, their family and societies perception of males being outwardly in control of their emotions and not showing softer emotions such as sadness and vulnerability. Regardless of nationality, Eddy, Diarmad, Shaun Óg, Duke and John Ryan explained how they heard about PD leading to crying episodes and this was not something men do, nor do they express or discuss their feelings. Duke explained how he

started hearing about people starting to cry and stuff and I was like this is not fucking happening (laughs) to me... and my uber matcho male brain would have been like, I don't want to sit in a room full of girls crying.

John Ryan encapsulated what the other five male participants explained

I had this big barrier up, no I'm not doing PD, I've never talked to anyone about how I feel because I suppose I grew up... I saw the father kind of came from a generation where you don't talk about your feelings, that's it, you're a man.

Later John Ryan explained, how he began to relax a bit more in 4th year and realised PD was not as daunting as he had conjured it to be in his mind and that it was not group counselling. However, John Ryan realised that in order to pursue a SCW career in LIT it was necessary to overcome *"the stigma that men are hard, men are tough, you don't share feelings and stuff like that..."*.

Cara noticed before PD he neither cared nor noticed how his past experiences were impacting on him or what his impact was on others. Whereas, since PD that has now become more of his focus along with how his behaviour is likely to impact others. Mary explained, there are times when she thinks she does not use PD in her practice, but upon reflection, she discovers she was using PD without even realising it because it became enmeshed in her practice. Mary stated *"you might be using it without even thinking you're actually using the PD itself"*.

Many of the participants recounted stories of hurt or woundedness. They tried their very best to keep that woundedness or hurt separate from PD for as long as possible. Nevertheless, by the end of their 4th year, participants had acknowledged and accepted their woundedness and hurt. They also made connections for themselves between their hurt and woundedness and how it could leak into their practice if awareness was not brought to their experiences. Guinevere, Chloe, Cara, Duke and Rose explicitly incorporated their woundedness and hurt into their narratives. Chloe for instances mentioned her numerous losses and the mental health struggles she endured before and during her SCW training. Chloe recognised herself as the *"vulnerable one"*. I would suggest that it is Chloe who best articulated not only the benefits of PD for her as an individual and the necessity of PD in both the personal and professional life. Moreover, Chloe observed that if PD is not experienced in one's personal life then the professional life will suffer even to the point of the professional being a *"dangerous"* professional. Chloe explained how PD was relevant to her, firstly looking inward at herself and accepting herself, realising she was a vulnerable person in need of support. That realisation is apparent when she intoned

That was a massive learning for me in comparison to who I walked in, in 1st year, you know. Now that was really hard and really difficult accepting that,

but I accepted it, and now I'm actually able to work in it (SCW), because of it (PD). And had it not happened, I probably wouldn't be working as a social care worker because I wouldn't have had any insight. I just think now, imagine say I had passed my exams and I never did that PD module? My god, I would be a dangerous worker I can tell you that. Picture having to work with someone like that.

Rich found PD gave her a platform to express her feelings and sometimes unexpectedly say something that caused surprise within herself. Having the scope to learn one's triggers and personally develop was experienced as "*amazing*" by Rich and Pippa. Rich believed PD learning develops one's SCW style, particularly with regard to RP. She recounted utilising PD journals and how that reflective piece is now so important. At the outset of PD, Rich did not place much value in journaling. Rich discovered the more she reflects in and on her practice, the more she learns because the more she engages with RP, the more information is gleaned from it. Information such as why did she react a certain way? Rich also noted how PD also prevents her from reacting from an unexamined place. Additionally, as Rich's explained

When we do our journals and that, I think that reflective piece is so important. At the time you're thinking, "This is ..." It sometimes can feel very monotonous or repetitive, but it allows you ... The more you reflect, I think the more you learn. And the more you can pull the things from it. Like why did I react that way? It stops you from reacting. It leads you into grounding, I suppose, that little bit more. But I think reflection is a good thing. I think a lot of the time we could be on autopilot. So I think that it has a lot of relevance there.

This section of the findings focused on participants' observations and views of the relevance and benefits of PD to them as SCWs and their practice. This includes how they engaged with RP and self-awareness, how they managed their woundedness. Additionally how males conquered stereotypes in order to fully engage with PD. A summary follows to conclude this first findings chapter.

6.7 Summary of SCW Graduate Findings

In summary, the findings indicate that it took some time for participants to engage with PD, it was only by 4th year that all participants were engaging with and acknowledging the importance of PD for both their personal and professional life. PD did not seem transferable to the majority of participants 1st PEP but did have relevance for many during their 2nd PEP, either at the time or retrospectively and depending on the intensity or difficulty associated with the PEP.

Elements of the PD module and curriculum were deemed relevant to the participants with PD transferable to both the personal and professional lives of the participants. Elements such as triggers, contemplative pedagogies, self-care, assertiveness, self-awareness and RP were reported as transferable to practice. The participants noted the difference between colleagues' with and without PD learning. Their observations included the inability of non-LIT trained SCWs to engage in anything resembling PD. Also observed was an inability to self-care, engage in RP, recognise when over-extended, seek supervision and support or recognise burnout. It was commonly believed that without PD learning SCWs were less self-aware and often impulsively acted without considering the consequences of their actions.

This concludes the 1st findings chapter which presented the findings from twenty one LIT SCW graduate participants over 5 major themes arising from reflexive TA. The next chapter is the 2nd of three findings chapter.

Chapter Seven: Findings from PEs

7.1 Introduction

The previous chapter, the 1st findings chapter, presented the findings from twenty one LIT SCW graduate participants. This findings chapter addresses the research question and sub-questions and was also the impetus for presenting the findings in this chapter. The findings are presented under similar themes as the previous chapter but from the perspective of PEs. The five major themes that will be presented are:

- Theme 1. Practice Educators experiences of PDG
- Theme 2. PDs contribution to SCW learning-Theory or PD
- Theme 3. Elements of PD Education transferred to Practice
- Theme 4. SCW practice without PD learning.
- Theme 5. Psychosocial responses to PD/PD relevant and beneficial

Before presenting these findings, a recap of the overarching research question and sub-questions is provided. The research question: “Is the PD module from LIT SCW HE programme relevant and beneficial for SCLs, SCWs and their PEP supervisors?” The sub-questions are as follows:

- How are PD, SCW and PEP defined, conceptualised and operationalised?
- How do participants and respondents articulate the content of their learning and their experience of PD as a pedagogical and practice process?
- What role, relevance and benefit, if any, does PD have in SCW education, PEP and SCW practice?

7.2 Theme 1: Practice Educators’ Experiences of PDG

This theme is comprised of PEs experiences of PD during their four years studying for their B.A (Hons) in SCW at LIT. PDG was considered the embodiment of the PD module. Overall, the participants have retained and practice their PD learning regardless of when they graduated. Three participants

solely focussed on the experiences of their SCLs but the seventeen participants that spoke of their recollection of PD had a positive recollection of their PD experience, in some cases surpassing the agreed curriculum. This positivity was not necessarily experienced in the first few years of PD but certainly the latter years, after PEP, and even more when engaged in SCW practise.

PD was experienced as a unique experience, a safe space to explore emotions, strengths and areas to work on. Participants stated how they became more open, self-aware, learned about boundaries and their triggers. PD, according to participants, provided reassurance, space to self-reflect and gain self-respect. Other recollections of PD included learning how to ask for support and to listen more effectively, how to explore and implement self-care and recognise and manage how one's own experiences can impact practice. Managing loss and grief and gaining confidence and grounding are also recalled from PD learning.

Emma recalled her journey through PD as something very individual since no one knows what will be triggering or challenging for them. Even the simplest activities can catch people unawares, such as, activities around loss and grief. Yet, types of loss and grief experienced, not necessarily death, became recognisable through PD. Emma went on to explain how beneficial PD was to her personally and professionally as outlined in the following quote:

...the more you learn and the more you can pull the things from it. Like why did I react that way? It stops you from reacting. I actually found, personal growth as a massive piece and a massive contribution to me. Even just as life, as a person, not even as a practitioner or as a person. ...my memory of it was it was challenging and there was pieces in it that were hard for me to go through. I think it kind of adequately or even surpassed, the kinds of stuff that it tells you it does.

Eva held a similar view to Emma when she explained how PD prepared her for the triggers that can arise and did arise during her PEP. Eva believed, because of her PD training, she was capable of working through the triggering events. Again, similar to Emma, but for different reasons, Eva found loss and grief “*amazing*” because of its usefulness in her practice due to a high volume of suicides within her organisation and wider circle of practice.

Declan found PD in its entirety “*brilliant*” and “*fantastic*”. He experienced PD as awakening him to how people perceive him as someone strong but his insecurities

were rarely displayed often leaving him lacking in the support he required and thus acquiring that support in PD. Declan explained how PD assisted him with resilience building, coping mechanisms, self-care, self-awareness and character building and expresses how PD is particularly necessary for younger people. Declan also attributes PD with regaining confidence in himself. This is illuminated in this quote

I was crushed by a few things that happened in my life, and I mean, genuinely crushed. And PD helped me reflect back on my own personality, my own strengths and gave me self-respect, and I found it goes with myself. It helped me revisit my background, that I always had, and knew it was there, but I wasn't allowed to show it. If that makes sense....

Aoife struggled with “*imposter syndrome*” for the first and most of the second semester in college. After Easter of her first year, Aoife fully engaged with PD and it was one of the key elements of the programme that she missed when she graduated. Aoife found PD to be a safe space within her week where she could let her guard down and just let go of anything that was going on for her. It was through PD that Aoife recognised her triggers and traumas including grief due to abandonment issues. She understood grieving was not solely reserved for mourning the dead. Coming to that realisation led to “*a powerful shift*” for Aoife. Aoife acknowledged in the quote below the reasons that her PD experience was so positive

we had the same group for four years. So our group boundaries were established in first year and they continued throughout the four years. We were really cemented and solid as a group. Even now, even though we graduated in ■■■■, there would be still a cohort of that group that would touch in and out with each other.

Vinny recalled PDG changing membership every year and it was difficult to discover if group members were trustworthy. Moreover, it was difficult for Vinny to start over every year, getting to know new group members. Whereas, being with the same group over the years, she expected that it would be possible to pick up at the same place at the start of each year.

PDG was acknowledged as the space where one's own emotions were explored. Additionally, PDG was where participants noted they became more emotionally open to what other people were going through. PD was also experienced by Vinny as providing the opportunity to gain a better understanding of what others were going through in their own lives rather than being totally focussed on one's own life. Vinny elaborated on this when she observed

I think we get so caught up in what we're going through and our lives and we think something that's happened to us is the be all and end all. But then you see somebody else who looks like they have everything together and they tell their story and it's kind of like, wow, you know?

Siave shared the same view as Vinny, when she too recalled how PDG over 4 years definitely prepared her to be capable of sitting back and listening to other peoples' experiences. Whereas, before PD, Siave considered herself a little egotistical and whilst aware of that, PDG assisted her to develop that skill of sitting back and listening to other people's experiences. Siave articulated this learning as having

...shaken something in me and yeah it's the first time ever you know because in other years and you are asking how's that and I say yeah fine and yeah you know draw a lovely picture...you would wonder or at least hope that by 4th year...

Milis, similar to Declan, described PD as "*fantastic*", for a number of reasons; firstly, it assisted in helping learners recognise, or learn to recognise, their triggers, particularly before embarking on their PEP, something Eva also mentioned. Another reason Milis described PD as "*fantastic*" is the ability to become self-aware with the PD teaching around personal awareness and how to become open to talk about one's issues.

Prior to Milis understanding the significance of PD, she would be angry at having to attend this mandatory class, but seeing the benefits and particularly how it transfers to her practice led to her changing her opinion. This manifested itself in not fearing to ask for support or talking openly about her feelings and emotions. This is evidenced in the quote below.

...I think, because we have the personal development, and we have to attend it, and, you get angry that it's on [inaudible] and everything, but then when you actually go out, you see the benefits of attending PD, because I am not afraid to go out and ask for support. And, I think, that is very, very, and I'm not afraid to talk about my feelings and emotions. The PD was a massive, massive milestone for me to become a better professional.

Tracey was eighteen years old when she embarked on her PD journey and indicated she lacked awareness then. Whilst she also acknowledged PD was "*fantastic*" it is only since working in the area of SCW that she began to realise the significance and benefit of PD. Tracey believed her youth and lack of life experience rendered PD unimportant, whereas, now as a SCW in a management position, she views PD as

“critically important” particularly around self-care and the effects of self-care. This is evidenced when Tracey stated

I still don't feel I had a thorough understanding about what it was and it is only in the past 2 to 3 years working in the area of social care that I am realising the importance of it and how beneficial it is and how important it is to look after yourself, mind yourself.

Alan remembered PD initially beginning very gently and wondering if he was back in preschool but then realising the gentle start was to allow everyone to become comfortable with each other. From there, issues began to be raised once a level of comfort had been reached. Alan recalled PD as *“beneficial”, “enlightening”* and *“good”*. He is unsure if this was related to being a mature student. Alan expanded on this further when he explained *“It's in there and it's in there. (points to head and heart)...Yeah. So, for God's sake don't ever drop the PD module, no matter what”*.

Conan believed PD provided the initial capability to consider self but hopes PD can be taken further as time progresses. He acknowledged that is what PD did for him *“it was the first time, really, as a young adult you start to actually question maybe why you do certain things”*.

Colm expressed how the emphasis on PD for four years allowed learners to get a very good look at themselves. Despite an initial resistance to PD, Colm believed that *“you can only be resistant for so long”*. Colm remembered how he held himself back in PD for weeks due to a prior lack of experience of people talking so openly about themselves and then he began questioning himself about the meaning of this. When Colm decided to engage in PD he began by giving a little bit more to the process each week. Then by 2nd and 3rd year, Colm was recounting his story and connecting to himself more. PD taught Colm not to push things away but to *“tap into it”* and he realised every one of us carries *“baggage”*. PD was also experienced by Colm as a safe space to share experiences of family. As Colm explained

I think there were things like about family that came up and things that might have happened and I said it. And afterwards, I was like fuck it, I had held onto that for so long. You know, I was always thinking or saying ooh I can't say that and then just being able to put it out there and somehow it became so liberating.

Martina credited PD with providing her with the language around feelings and emotions and how to process those feelings and emotions. Martina expanded on this

when she asserted the language around feelings and emotions is no longer obscure and neither are the skills necessary to work with individuals. Martina contemplated PD to be

just like opening a window in a dark room and it's like, "All right, it's not that bad in here. I just needed to look at it a bit differently." And it's not taking the experience or the pain or any of that, but it's just shifting your objective on it and seeing, could I see it differently? Or even sometimes just acknowledging it for what it is.

Evan remembered PD as a space to sit down and reflect or think about different issues. The final year of PD was the most advanced and the most beneficial for Evan mainly due to having completed his PEPs. As Evan stated *"For me it resonated when I was in 4th, after my placement. Absolutely."*

This concludes Theme 1 of this findings chapter which presented the findings related to PEs experiences of PDG. All the participants value PD for their practice with some participants also finding PD relevant and beneficial for their personal lives. This next section presents the findings related to whether hypothetically PEs would choose a potential SCL/SCW with solely PD learning or solely theory learning. Additionally, this next section also presents findings that consider the contribution PD makes to SCW learning.

7.3 Theme 2: The Contribution of PD to SCW Learning-Theory or PD

This theme considers the contribution PD learning made to SCW learning and whether hypothetically theories or PD learning are equally valuable or if one is more valuable than the other.

In a scenario where a SCL/SCW could bring either PD learning or theory to their workplace, sixteen participants stated they would choose, with varying degrees of certainty, someone with PD learning over solely theory knowledge. This was for various reasons, such as theory can be learnt from a book, whereas, PD cannot be learnt from a book. Other reasons included, having PD learning will be of more benefit than theory, as the individuals SCWs work with, would much rather a worker with PD learning than an academic approach.

Aoife would choose a graduate with PD learning as she expects they will have undertaken a certain amount of work on themselves. Aoife outlined that having an

awareness of our own experiences allows us to empathise with individuals worked with and their experiences. Additionally, Aoife expanded on this when she further recognised that having PD learning safeguards the SCW too, particularly when they know their own boundaries and limitations. Aoife noted that change comes about through our own vulnerability as this quote explained.

Any one of us can sit down all day and read books and learn theories and discuss theory and go to tutorials and watch TED Talks and watch stuff on YouTube or webinars or whatever it is. But to be engaged in a PD process, you have to allow yourself to be vulnerable. It's through your vulnerability that brings a change in you.

Siave explained how the lived experience of working in SCW bears little or no comparison to what you read in Giddens. This is a view held by Grace also. Another view Siave shared is her thinking around needing to ascertain if there exists a capability to maintain boundaries and to reflect critically when she stated

I don't think theoretical work prepares you for SCW so I'm probably leaning more towards somebody who would be trained in personal development. ... I think for me personally, PD prepared me a lot more than theory did, do you know...how to reflect critically and building skills on self-care and things like that ...

Both Evan and Alan would choose the graduate with PD learning whilst acknowledging theory has a role to play in practice. Yet, from Alan's perspective a significant amount of the work is RP, particularly, since they are such a crisis driven service, working with some of the most difficult and traumatised young people in the country. Alan explained how having the theoretical perspective is more beneficial for attending various multidisciplinary meetings than actual practice. Due to the volatile nature of Alan's workplace, they generally seek to employ male SCWs which leads to a gender imbalance. Regardless of gender, if the graduate has PD training he will employ them. As Alan further explained

... yeah, because you'll be in situations where the heavens are falling in but there's a kid has you by the throat and wants to beat the hell out of you. You're not going to be citing theory to him. you may not know Freud off the bat or Bowlby and all this stuff or whatever, but if you have the ability to come in and reflect on what has just gone on and what you're going to do in the future you will have had that in PD, because you'll have done Kolb and all his stuff....I'll go with the PD.

Evan shared the same views as Alan since he also

thinks the theory can only do so much, but to be honest, if I was to select someone that I... And it's hard to know this, but I could tell that they're a better practitioner, I would be more inclined to hire them. But definitely when it comes down to the personal development piece, for me, that would probably be the key.

Maria would also choose the graduate with PD, someone who has an awareness of how they feel in certain situations. SCW situations involve drugs, family issues, sex and sexualisation. Maria believed knowing where you are cognitively and emotionally with these issues is important. Yet, equally important, is knowing how each of these issues will affect you, with the necessity to be capable of seeing it from the other persons perspective. As Maria confirmed "*Students with personal development have that.*"

Jenny also would choose PD over theory for a number of reasons. Those reasons were based on having observed people within different services who are very academic and theory based. According to Jenny, every case encountered is completely different. Having undergone PD learning leads to increased confidence, in addition to being more communicative, demonstrating processing and reflective abilities. Some theory that might be applicable for one individual may not apply for another individual. Ultimately, for Jenny, it comes down to how the SCW processes the theory and the information. Possessing all the theory, in Jenny's view, is not a guarantee that the SCW is capable of undertaking practice. Jenny's reasoning for this view was that the development of a relationship is key to the success of the work. Jenny's noted

It's not because PD ... the topic is around PD but I do genuinely believe you're at nothing if you're not looking inside yourself. If you're coming with your own stuff. And the thing is with social care a lot of us come into the field because we've experienced these situations because you know ... So, it's super, super important to really develop personally before you go trying to help somebody else.

Eva believed coming with PD learning, SCLs are self-reflecting from the start. Eva was also of the opinion that theory can be learned anytime and anywhere and applied but equally she sees an inherent danger in relying solely on theory. Eva stated

Whereas if you just come from theory base, it mightn't work. And suddenly you're like, "Oh right. Well it said in the book it's supposed to do this so why didn't that work, in the book it said it should".

Diana chose PD learning because she believed theory would slot in around the PD learning when she stated “*I think the theory would fall into place once you have kind of an understanding of who you are and how you go about things and those around you*”.

Emma and Paula share similar views. Paula believed PD is “*invaluable*” and Emma augments this when she stated “*I think it would have to be the, the PD learner. I think there'd be definitely more scope for growth and learning and yeah*”. Tracey also confirmed her choice of employee would have engaged with PD, therefore, having an increased self-awareness and with this increased self-awareness Tracey expected

they would have a better understanding of, and empathy, for the clients that we are working with you know and that is critically important that you are not, not there to judge them.

One participant was not asked to choose between PD learning and theory and three participants were torn between choosing between PD and theory agreeing that there had to be a balance between the two as the following quote from Aisling demonstrated.

You know I don't think it should be solely PD, as much as I enjoy PD and thought it was very beneficial stuff. It is important like, because I suppose you look at, you are going into people's families, there is a lot of family dynamics and attachment issues and you have all that kind of stuff, so understanding the behaviour too.

This is a similar view to David who believed it would be dependent on the person being self-assured and then PD would be his next consideration once the prospective employee was

more inclined to be reflective within themselves and they'd be more inclined to be transparent with the supervisor in the meetings. And they learn from there

Milis recognised that PD in its entirety led to her becoming a better SCW. Milis believed SCLs with PD learning are “*far more interested and enjoy what they're doing*.” The contribution PD makes to practice is highlighted by Aoife as providing the opportunity to explore the self and to process any of the issues carried, before engaging with individuals. Aoife explained in the following quote that as SCWs we work with individuals

that are incredibly vulnerable, might be traumatised, that are triggered all the time. They have a huge sense of insecurity in the world, they have a mistrust that they've learnt from a very early age. I feel that the group process in PD allows you space to process. I think it's imperative to this line of work. I would see it in the student.

This concludes Theme 2 of this chapter. The majority of participants, whilst acknowledging the value of theory, would prefer to hire a SCL/SCW with PD learning or elements of PD learning over solely theory based learning. The reason for this preference, is due in part, to the difficult nature of SCW practise, taking into account the vulnerability and the trauma experiences of the individuals worked with. Also, prior to working with individuals, it was noted that the issues carried by SCWs prior to practice should be worked on in PD. Theories mentioned seen as carrying the same importance as PD were Kolb's RP and attachment theories.

This next section focuses on Theme 3 and presents the findings concerned with the elements of PD transferred to SCW practice.

7.4 Theme 3: Elements of PD Learning Transferred to Practice

This theme considers if and how PD learning transferred to practice. All participants provided examples of their experiences of how PD learning transferred to their practice either personally and /or for SCLs during their PEP.

ACEs were mentioned by three participants, in particular, around how their organisations looks at the ACEs of individuals availing of their service but not the staff. The participants noted 66% of the population have 4 or more ACEs and concluded that the 66% must also include some staff. Thus, making it vital that SCLs/SCWs can, or at least know how, to identify their triggers before entering SCW practice.

This quote from Jenny highlighted the lack of focus on SCWs ACEs

They (workplaces) don't acknowledge that you may have been through your own stuff. You've your own story. So it's up to you as a worker, as a professional, to seek stuff like PD, to seek courses like this, to work through your own stuff, because like we're working with very very vulnerable people and it's up to us to make sure we have our stuff in check before. Because you have transference, counter-transference and it happens so easily if you're not aware of it.

Siave believed the PD experience triumphs over socialisation, background, prior learning and value bases as a result of ones upbringing. Particularly, as Siave noted,

an upbringing that prohibited engaging significantly with experiences and feelings. Siave believed, as the quote below demonstrates, engaging with PD opened people up in a way that they could recognise their triggers. This ability to recognise their triggers assists them to know when they are impacted during their practice. *“Personal development totally opens up people, and opens up an ability to recognise triggers and recognise I’m been impacted here”.*

Recognising triggers, related to grief and loss, experienced across the life span was also prevalent among the participants in regard to the learning transferred from PD to practice. This was not necessarily deaths but abandonment and other losses such as relationships, both personal and professional. According to the participants, learning from PD enabled them to identify those triggers which have had powerful affects and effects on them personally and in their practice.

For instance, Evan explained in the quote below how triggers can be activated but knowing what they are before being triggered is beneficial.

Unfortunately you are dealing with at risk young people, old people, whatever it is, and sometimes they will go for your trigger points. It's about identifying where they are, and able to see that coming, and maybe deflect it onto something else if you can. I think yeah, that's beneficial. I think by doing PD, throughout the years, you do establish these things. Whereas you're not going to establish that by sitting down and doing sociology class. Let's be honest.

Since a substantial amount of the participants' practise is with emotionally wounded and traumatised individuals, often having experienced an inordinate amount of loss and trauma, as a consequence, self-reflection and RP, and other elements from PD, are valued as either an individual or staff process. According to the participants, it was deemed important to identify one's own baggage/triggers and deal with issues arising from this self-reflection and RP.

Jenny's quote provides an example of how self-reflection and RP assisted her to work through a triggering event.

like I've done a big piece of reflective practice, because I found I was being kind of triggered by a client and it turned out he's similar ... he's an adult and I've a [REDACTED]. Eyes are really similar to [REDACTED]. So it was through that I was triggered. But it was through reflection, looking at myself personally, trying to pinpoint what's going on here, doing a lot of processing kind of stuff. I was able to understand then. The eyes, that's it. Yeah.

Grace explained, in the quote below, triggering is likely to happen to staff due to the sensitive nature of the work.

You know and as we go on in life stuff is going to come up for us, but we are really kind of working in a very sensitive nature, you know it's gonna trigger some points in us....you think oh god, never thought this would pop up, oh I thought I had that dealt with by now. And that was, you know, daunting and it's thinking oh god...so saying that, just be mindful of that, just protect yourself.

Participants, including Tracey, Colm and Evan, who are also employed as managers, expressed their encouragement for staff to open up in supervision. This opening up allowed PEs to observe when SCLs/SCWs were struggling and tentatively broach the need for self-care. Self-care is another element from PD learning that has transferred to the participants' practise. PEs were more than willing to explore activated triggers for SCLs, particularly, if the SCL could acknowledge been triggered and was open to the learning from that experience. Moreover, how their experience could possibly assist the individual that triggered the SCL was also examined. This examination also extended to how this triggering experience can help the SCL themselves. Siave's quote below expanded on the above

I've spoken to students in their supervision you know, those that are...they are triggered and said they had this conversation with ... a service user and I felt like this. And I will ask, why did you feel like that ..., well let's go back and think about that then, what is it, why the trigger and emotion in you. And to each it means something personal...so that's why I think for me, that's where the personal development helps the student, it's an ability to recognise all that when I talk to somebody about their mental health issues ... or somebody that has been talking to the student about a friend dying by suicide that reminded them of this do you know.

Conan explained there is a "*discipline in creating space to reflect*". In Conan's view this takes time to master, particularly for those from other disciplines. Conan also suggested that those without PD learning tend to impulsively go into interactions without thinking about the protective factors. As Conan went on to explain,

I do think there's even a skill, maybe that's learned through PD, in slowing oneself down and taking time to reflect on what you're actually doing, and the potential impact that has on the care of children.

Participants agreed with Conan, failing to recognise triggers or when triggered can lead to boundaries been crossed. A consequence of not stepping back from that piece

of work to self-examine or reflect is considered poor and dangerous practice. Siave's quote explained this from her PE perspective.

if at times those boundaries have been overstepped by some students and they do not recognise that they were being triggered at the time and they have gotten very emotional, emotionally affected by things here. At times that's a difficult road to travel with a student because there may not be much insight into why they are being triggered and you know sometimes it's kind of a start of a journey for them...the more insightful and developed students we have had, have recognised it in the moment, that ooh I am getting a bit shaky here, so there is an ability to disengage and go right I need to, I need to step back here because a boundary might be crossed or whatever.

PD, according to the participants, seemed to be the place to discover that you are not alone in having issues and that having issues is wholly acceptable. Colm identified, in the quote below, the difference in potential SCW employees when he interviews for vacant positions.

I've had interviews in different regions where students were potential employees have had their education in different institutes where there isn't an emphasis on PD and that definitely shines through in their answers in how they respond and how ...they are experienced...as a starting point I think whenever the decision was made to provide PD, I take my hat off and commend it, because I think that in itself allows practitioners to work with intellectual disabilities, young people any vulnerable group. As their starting point, it gives them such a good footing and I and other managers can see directly the people that we have spoken to who haven't been through LIT social care programme.

Colm expanded on the above quote and noted that staff and learners that have come from different disciplines, youth and community, counselling, psychotherapy, social science and also social care from various Institutes of technology, that do not have an emphasis on PD, and therefore can feel threatened by the style of SCW practise implemented in his organisation. This practise directly mirrors the learning that LIT SCLs/SCWs have experienced in PD. This includes respectfully challenging their own and each other's practise and the culture of RP and supervision. Participants agreed, what is important is, how issues or challenges are overcome and how to utilise the strategies from PD to aid this process. A number of participants including Paula, Tracey, Conan, Jenny, Martina and Colm acknowledged they only employ or accept SCLs for PEP from LIT. This quote from Conan explained that

in terms of where students or other students come from, other disciplines and institutes, absolutely not and the calibre of people that come here from

LIT, they are a step up and step above those that come from other institutes and it is a credit to LIT and the course that you run.

It was considered a bonus by participants to have SCLs undertaking their PEP from LIT due to their engagement with PD which, according to the participants, leads to SCLs bringing compassion, empathy, a level of trust and openness, an added level of ability and flexibility. More willingness to engage relationally with the individuals or groups they work with and *“get stuck in with the work”* was another view. Other elements of PD transferred to practice, from Milis’ perspective, included, having a better sense of self-awareness with the ability to take on constructive criticism as constructive. Milis acknowledged that LIT SCLs generally do not become defensive. This is something Colm also mentioned. Milis also recognised that engagement with PD has taught SCLs to analyse both what is going on for them and any other elements from PD they bring to practice, in a more open and accepting practise.

Diana acknowledged SCLs engagement with PD leads to a better supervisory experience not only for the supervisor but the supervisee also, particularly 3rd year SCLs undertaking their 2nd PEP. Diana went on to state

But the third years, they were okay about it, I thought they brought issues to supervision and really wanted to talk about things and why they felt like that. They challenged things a lot more than the second years and I think it was to do with, they had more of an understanding with the PD, and what it was for them, and that they were going to benefit from it.

Emma described the differences between SCLs/SCWs that have had PD learning and the elements of PD they bring to their practice.

And even from social care students or social care graduates that have been through the different programmes, I'm quickly starting to, I suppose in my last job I was far more surrounded in LIT students, with the odd one, but more recently, it's like the students that have that reflective piece just bring an added level of ability I think to be quite honest...the most beneficial and easy to work around are the ones that are willing to reflect and to learn and to sit and talk about what's going on for them.

Contemplative practices, such as meditation and mindfulness, from PD learning were considered a useful tool to bring to one's practice for a number of reasons. Aisling remembered how awkward meditation was at first but now recognises its importance in her practice. Being mindful of when you think you have overcome a trigger, it can unexpectedly manifest itself in some other area of life/practice when least expected.

This knowledge was considered a function of contemplative practices. Self-care elements from PD learning was considered, by participants, to be an even more necessary practice when encountering triggers as part of SCW practice. Meditation and mindfulness were deemed beneficial by participants in ameliorating some of the intense feelings experienced during practice. Whilst meditation and mindfulness were viewed as helpful for SCW practice, particularly self-care, it was considered necessary, by participants, to have worked through or be in the process of working through one's own issues before working with emotionally wounded and traumatised individuals. This process of working through one's issues was deemed essential, whether that occurs through PD or similar, RP or counselling. However, it was considered paramount to prevent being triggered or triggering others as much as possible through whatever medium was deemed appropriate. Equally important was being aware of transference and counter-transference in practice by adopting RP, contemplative practices or any other strategies.

Martina found it difficult to verbally express the specific elements of PD transferred to practice but she maintained that you always recognise those elements. Firstly, Martina acknowledged there is a language around those elements and the language is evident, for example, during debriefings if something has gone awry. The language is always reflective as the following quote from Martina highlighted.

"How could we do things better? How can we change? What did we miss that it got to this?" You have a common language with the staff who have tapped into this awareness and have been part of this learning process. When you have somebody who has gone through that process and who are aware of their own stuff and what they're bringing to the table, they will name it straight away. They'll go, "Well actually, do you know why part of that was my fault? I was tired, I was cross, I was hungry. I wasn't the person to deal with that, I probably shouldn't have."

Emma, Aoife, Colm, Aisling and Eva explained how family work from PD transferred to their practice by preparing them for triggers that arose for them. Aisling expanded on this when she referred to SCLs finding themselves in a situation where an individual worked with had experienced a similar family issue to the SCL. Those with PD learning, according to Aisling, revert back to strategies from PD learning to resolve what is surfacing for the SCL/SCW, which may include RP and naming it to the supervisor.

This concludes Theme 3 of this chapter. The participants put forward their views of the particular elements of PD that transferred to practice. Elements such as strategies for coping with triggers was to the fore of the participants' experiences. Also, the participants spoke of a universal language that SCLs/SCWs bring to their practice. Additionally, LIT SCLs/SCWs were perceived by participants to be willing to open up in supervision, particularly during their second PEP. Elements of PD believed to be transferred to practice included such elements as RP and self-awareness. Overall, participants reported the ease with which LIT SCLs/SCWs were identifiable by their practice which participants attributed to PD learning.

This next section presents the findings related to the participants' observations of the difference between SCWs practice both with and without PD learning.

7.5 Theme 4: SCW Practice Without PD Learning

This theme considers participants' experiences, observations and views about SCLs/SCWs with and without PD learning.

A number of participants, all of whom had availed of PD learning and worked with colleagues with and without PD learning, observed the following in colleagues without PD learning. Participants reported those without PD learning lacked the ability to self-reflect or request supervision or support. It was noted by participants, that colleagues without PD, tend to experience burnout as a result of that inability to open up about their practise and associated emotions and feelings and are more reactionary in their practice.

This quote from Milis expands on the above when she stated

I've noticed some of my colleagues struggle with self-reflection and reflective practice, because they didn't have personal development, and maybe, they don't have the self-awareness that we would have. And be able to reflect on the practice that LIT graduates would have, genuinely. ...some of my colleagues, who didn't have PD in their studies, are not able to do it, and they don't ask for supervision. They don't ask for help, and you know what happens then? They might, I've witnessed that one day, they just had a mental breakdown, and didn't want to continue anymore. And, they burnt-out way quicker than those people who are able to talk about their practice and their emotions associated with it, and their feelings.

Martina built on the views of Milis when she identified SCWs that have recognised and worked through their issues as opposed to those SCWs who have not. It is imperative, in Martina's view, to have the awareness to examine if you are the right person to engage with that individual at that time. Martina noticed

The difference between people who graduated in a different university who don't have that element, it's like there's something lacking. There's something very different about the way they practise, how they present and it's always down to self-awareness, and self-presentation... you will see from practitioners, the people who have identified and dealt with their stuff and the ones that haven't. And in order to work in this line of work with people who you would meet, who are broken and damaged and have all of this horrible stuff that have happened to them. If something in that triggers something in you, you have to have an awareness to go, "Actually, you know what? I'm not the person for this" and if I am, I need to know my limitations and how far I can go with it before I'm in it with them.

A different approach, outlined by participants, was taken when suggesting a colleague with PD learning and a colleague without PD training should implement self-care strategies. The two different approaches are taken due to possible misinterpretation when self-care is suggested to the SCW. Tracey promoted self-care to the learners whilst engaged in their PEP and those with PD took the suggestion of implementing self-care in the spirit it was intended rather than trying to hide how overwhelmed they may have been feeling. As Tracey explained

it always goes back to self-care and students minding their self while they are on placement and if there is stuff that is overwhelming them that they come talk to us or seek support from LIT or maybe they need to seek some other counselling supports or something.

Participants working with colleagues without PD noted they are often overly self-critical, overly analytical or look externally or apportion blame as to why an incident occurred and they can also present as being quite closed off around their feelings and emotions. It was also noted that SCWs without PD learning deny or refuse to engage in or incorporate anything resembling PD in to their practise. Martina articulated this when she stated

if something really terrible has happened, like worst case scenario, when a young person dies, that member of staff, "Well I don't need counselling, I'm fine." You know? Then they'll go to the funeral, they mourn in their own way, but that's it. And you're like, you're allowed to have feelings. You're allowed to feel this way. You're no longer Wonder Woman, we still think you are amazing, but you have stuff here as well, and that's okay. Whereas there's a real coat of armour that people tend to wear where it's like, "No, I'm fine. I'm very much a professional and I am grand and my stuff is, it's nothing to do with me. This is my work".

According to Jenny, Emma and Martina, implementing TIC was also deemed a difficult experience for colleagues without PD learning. This difficulty was considered to emerge for a number of reasons. Some of those reasons were related to inexperience or insufficient knowledge around RP and triggers. Participants believed that since self-reflection ensures you visit self-related issues and triggers and limitations, it is to be expected that colleagues without this learning would struggle with TIC practices. Therefore, according to the participants, it seemed apparent that colleagues without PD learning cannot, and do not, fully engage, or even somewhat engage, with this TIC process. The participants observed colleagues without PD learning to be habitually resistant to engaging when challenges or difficult situations arose. With 66% of the

population having four or more ACEs, the participants deemed it reasonable to look at our own ACEs before we work with other individuals. Emma has noticed a deficit in staff without PD learning when it comes to implementing TIC. This was for a number of reasons as outlined by Emma

And I think sometimes... the staff member hasn't done the PD piece, finds the trauma informed care more difficult. More difficult to bring in and look at it as concepts. That's massive really, I think it's quite a big deficit for a practitioner not to have a really good strong PD foundation. If you're going to go on and move forward and then reflect on yourself and how your actions are impacting on a user of service in that sense.

Milis believed SCWs without PD learning are at a disadvantage as they most likely have not experienced opening up or speaking about their feelings and emotions. This in Milis' view possibly rendered SCLs/SCWs without PD unable to cope with challenging and upsetting situations encountered in her workplace. The following quote illustrates Milis' viewpoint.

They probably don't have PD if they weren't put in that situation when they have to open up and speak to someone. They wouldn't be able to cope, maybe, as well with challenging situations as they are, well, especially in my organization when some situations can be very upsetting, and, incidents can be challenging.

Conan recognised the frightening experience it can be for SCLs/SCWs without PD learning to self-reflect and articulate feelings to others. Conan equated a SCLs/SCWs professional ability dependent upon that ability to self-reflect and articulate those feelings to others. This quote from Conan illustrates this.

I think someone who hasn't ever sat in that kind of therapeutic group setting, it's really alien coming in to something being facilitated with a clinical lens, let's say. I think it's a very alien kind of process and it takes them quite a while. You have to look inward, and you have to tell other people how you're feeling, and I think for the normal lay-person, I think that's a frightening thing. For someone who's social care trained, and who has come from doing PD, it's far more natural, I think, and you definitely see that. I think that's the most concrete piece where we would see someone's ability.

Vinnie shared a similar opinion to Conan, they had one non-LIT SCL and 4 LIT SCLs simultaneously engaged in their PEP. Vinnie understood from the non-LIT SCL that many of his suitable qualities for SCW practice seemed to have evolved from undertaking volunteering opportunities. In the quote below, Vinnie articulated the

qualities the learner possessed and lacked and the reasons why PD learning would have been beneficial.

He had good qualities that he had and a lot of volunteering experience and he was a really go getter and he really was a good people person, but I think he could've done with PD in a sense for his own reflection and his own... to kind of understand why he does certain things that he does and how to work in a group and have a bit more of a level of understanding with the people that we work with but he himself actually said that, that's one thing that they're lacking is that space. And it's a good space for the students themselves to kind of have a bit of an outlet and to feel like they're not alone in certain situations, and that other people are in the same boat with them.

Maria, Colm, David, Aoife, Eva, Evan and Jenny have, in the past, taken both non-LIT learners and LIT learners for their PEP. Maria found having non-LIT SCLs "*wasn't the best experience*". Colm also explained how testing and challenging he finds having SCLs during their PEP without PD learning. Colm and David have also witnessed more insecurities within non-LIT SCLs. As explained in the quote below, taking on a non-LIT SCL requires, according to Colm, more tact and less directness and a carefulness not to sever the working relationship.

It can be a little bit more testing or challenging to kind of broach certain topics to sort of to kind of where to shine a light on some of the blind spots... trying to tread a little bit more carefully with that because general experience is that they don't have as good of an awareness of themselves.

Aoife explained her experiences with learners from various HEIs and the reservations she has around taking a non-LIT SCL in the future. Even though these learners brought some valuable contributions to the service, they were not equipped for the work they were coming in to do. The organisation facilitated a learner as a favour but found it incredibly difficult to support that learner without any structures or expectations from their HEI and this was something Eva mentioned too. Aoife outlined her struggles with the non-LIT SCL in the quote below

I've had students on placement now, from LIT. I've also had students from university. There's no comparison. I would have sat with somebody from ■ here a couple of weeks ago, where you're sitting, and told him very seriously of my concerns with their placement practice and why I wouldn't be taking a ■ student again. And this just wasn't down to one student, this was down to a couple of experiences. Don't think that the students were inappropriate, they were great. They were great assets to the place, but the set up and the support around them, does not equip them for this line of work. I think PD is the key part in some of that...A little bit slower to engage

and a little bit standoffish, I would say, and lack that bit of confidence to say, "I'm so-and-so, I'm here on placement, how are you?" ... I think the students that don't have the PD background, it's harder to do that type of work with them. It's harder to get them to that pinnacle moment in placement. They're seeing their confidence isn't as the others are.

Maria also mentioned that she too found non-LIT SCLs to be slower to engage and they also lacked confidence. Diana's experience of non-LIT SCLs is similar to Vinnie's and Eva's experiences. Diana has found non-LIT SCLs "*to be much more relaxed*" "*like going through the motions*". This is in complete contrast to LIT SCLs who have goals to achieve before their PEP ends. Evan has experienced SCLs and SCWs having graduated from various HEIs and he believes they may not fully understand the ethos of supervision; the intensity of that dyadic exchange where the SCL/SCW is required to sit and reflect. It is quite possible, in Evan's opinion, SCLs/SCWs may view supervision as an accountability exercise as the quote below attests.

...other people that came through different youth and community down in [REDACTED], I don't know if they got that supervision thing. That intensive... being able to sit down and reflect piece. I don't know if they have it. I think some people see supervision as accountability, whereas it's not. It's not about that at all. Some parts of it, but not all.

Both Evan and Eva found it interesting that when they have taken non-LIT learners for PEP that they are not required to engage in supervision. Their write up, according to Eva, can be as vague as they want and those learners are a little more blasé than an LIT SCL who have a formula to follow, a certain number of supervisions are required, an intervention and so forth. Eva provided an example, in the following quote, of taking two students on a home visit and the difference between the learner that had PD learning and the learner that did not have PD learning.

I suppose a big part of my role then would be to go into people's houses and work with the families and it's a lot. We try to protect the student as much as we can. But they do hear sensitive information....Whereas with the [REDACTED] students I'm always a bit more aware of you know, "That they could have been affected you know, make sure you come back in" whereas the LIT usually, you know, ready for sure it comes up and goes "Oh God, I didn't feel okay now after that" or, you know. Or can you reflect and come back or...Whereas the [REDACTED], they're like "Hi, that was great." Cause they're not looking, you know.

This concludes Theme 4 of this chapter. This theme focused on participants' observations and views of SCLs/SCWs with and without PD learning. For the most part, whilst bringing some useful qualities to practice, not having PD learning was viewed as a deficit for one's practice and ability to self-care. The next section focusses on Theme 5, the final theme of this chapter. Participants' psychosocial responses to PD is the focus of Theme 5. Another focus of this Theme is whether PD is relevant and/or beneficial for SCLs and SCWs.

7.6 Theme 5: Psychosocial Responses to PD/Relevance and Benefit of PD

This theme focusses on participants' psychosocial responses to PD and outlines whether PD is relevant and or beneficial for SCLs and SCWs.

All participants either directly or indirectly impart their perception of the benefit and relevance of PD to them personally and professionally and the reasons for those perceptions. Despite all participants finding PD relevant and beneficial, one of those participants, Declan, likened PD to "*fairy dust*" and whilst they found PD relevant and beneficial to them, they believe PD needs to further prepare people for the real world of practice, to be able "*to take the knocks*". Be provided with "*the resilient model around developing coping mechanisms and when something happens and you get a kick back, that you're able to come back*".

PD was considered by Vinnie to be a "*mind opener*" and credited with "*speeding up maturity*" and being more open and accepting of others. Being more open, in Vinnie's view, was perceived as beneficial when a SCL comes to Vinnie's organisation for their PEP. More openness, in Vinnie's experience, equated with getting a lot more from the organisation. Vinnie recognised the opposite occurs if the SCL is "*more closed off*". Vinnie explained the relevance and benefit of PD for the individuals worked with in the following quote

We feel they're a huge benefit to the guys here because when the students come and they have that experience of being in PD, they have that level of compassion and they're very supportive in their ways. Very open and willing to have a conversation with someone and let them talk and they're great listeners and very empathetic. But they're also great at working in groups and great to work one to one with the clients, and that's a huge plus for us here. So when the students are here, they have that level of trust and empathy and stuff that they're great to get on with the guys and get stuck in with the work here.

Siave recognised how daunting it can be to undertake PEP and engage with individuals who are presenting with alcohol issues and or mental health issues and having PD helps the learner with that engagement. Alan also concurred with Siave in respect to PD helping learners to engage with individuals worked with. However, Alan noticed, particularly, newly qualified and young SCWs from LIT are able to verbally acknowledge their struggles, they are assertive enough to say *“we need you for 20 minutes”* and just come in and unload. In addition, Alan also noted that SCLs, that have engaged in PD, are more agile during their supervision. This agility is because they have let down their barriers; they know to talk about their practice and their personal issues too, particularly if those issues are affecting their practise. From Alan’s perspective as the quote below demonstrates

they've had the PD so you know that the supervision side of things that they will have had the experience of opening up, of being in a comfortable situation where, "Okay, I can talk about this. I know what supervision is," and they will have that background. I think PD is very much advantageous to supervision and is perfect.

Aisling also noted that during their PEP, the LIT SCLs will seek out supervision and will also be well prepared when they enter supervision. Aisling noted how they brought in *“snippets from their journal, so to remind them and it’s stuff from the week discussed in our supervision sessions”*. Milis has had experiences of non-LIT learners and graduates not asking for support or supervision. Milis explained that LIT SCLs are capable of talking in their supervision but she would be concerned to have someone in supervision not talking or opening up.

Similar to Siave, Alan and Vinnie, Paula also has noticed the benefit of PD in the quality of the interactions SCLs have with the individuals they encounter during their PEP. As the quote below demonstrates, Paula has observed SCLs reach and connect with some hard to reach individuals.

you might have had clients here that never got involved in any activities, just wanted to get on with their everyday life but didn't want to be involved in anything and you'd be surprised how well the students would I suppose connect with them you know, in a professional relationship and they begin to trust them and before you know it they're all involved in and it's great.

Emma acknowledged the role mandatory attendance plays in ensuring PD is beneficial and relevant. The more experience and contact Emma has gained with SCW graduates from other HEIs, the clearer it has become to her who has and who has not

engaged with PD learning or similar. Emma explained how it is impossible to “*dip in and out of a PDG*”. Emma demonstrated how relevant and beneficial PD is to her when she stated “*It's a really solid piece of work...it's just amazing. I think it's actually a real credit to the whole degree*”. Emma outlined how at first she disliked reflective writing and journal keeping when she stated in the quote below how valuable she now finds reflective writing and the benefit and relevance of the reflective journal to her practice

I suppose the reflective diary that we did, I hated reflective practice in the writing and the beginning and thought, "Why are we doing all this?" And then the penny drops after coming out of your first case and it's your second and you realise the value of it, so I suppose that would be the massive part for me.

Aoife recounted a high volume of losses she has experienced in life and upon graduating had a number of family members diagnosed with serious illnesses within one year. Without PD and particularly the loss and grief elements of PD, she does not believe she would have been capable of completing her M.A programme had she not engaged in PD learning around loss and grief. Aoife acknowledged in the quote below having a SCW degree alone will not guarantee one will be a good practitioner.

Definitely anybody that's doing Social Care needs to partake in a PD program. We know that there are a certain type of people that are attracted to this work. I've had my own life experiences and I'm fully convinced it led me on the path to being here. And unless you're very healthy and you're very well and you're very aware of your own experiences and the impact of them and you've a certain amount of process work done, it doesn't make you a good practitioner.

Martina shared a similar view to Aoife when she explained the difference between graduates from different HEIs who have not experienced a PD element to their training. This became apparent in the way that they practice. This quote from Martina highlights her viewpoint.

The difference between people who graduated in a different university who don't have that element, it's like there's something lacking. There's something very different about the way they practise, how they present and it's always down to self-awareness, and self-presentation.

Vinnie explained, in the quote below, the reactions she receives when she tells others that PD was part of her SCW learning.

But it's one of the things that we always get noted for when we go out on talks. If we're ever talking about the LIT course that we did and PD, and

people are kind of like, "Oh my God, like that's part of the degree" and they're quite shocked like, we should be bringing that in from somewhere else, and like absolutely, because the work is so heavy.

Aisling explained that all their staff and managers are SCW graduates from LIT. Martina sees the benefit and relevance of PD when it reflects on the SCWs practise and when it is clear PD is embedded in the person. Maria personally found PD to be relevant and beneficial to the point that when she graduated she missed PD learning and now attends counselling when she notices more PD work is required. From the SCLs/SCWs perspective the benefit and relevance of PD, according to Maria, provides the skills necessary to work with groups and on yourself. Maria stated

It gives you more of a holistic approach and that's for, it's particularly for you at work. That's where your head space needs to be. Because you have to be on all the time, and you have to be aware of you all the time. And every given day could be something different.

Evan explained that he noticed the supervisors, working in his organisation, who are LIT SCW graduates offer significantly more supervision to SCLs than supervisors that are non-LIT SCW graduates. Evan believed that for LIT trained SCWs this is "*because they've probably been so used to the process. They affiliate with the advantages of it, and they'll go do it*". Evan also stated "*PD obviously, is very beneficial*" due to the ability for SCLs /SCWs to see that the work is not just work, that it is intrinsically tied to work life balance and the ability to understand that one has to continuously self-reflect and self-care. Evan also explained how PD was beneficial and relevant to him, when he was employed as a SCW for young people, in the second semester of his 4th year of SCW training. Whilst embarking on the work was a very new experience, Evan believed PD assisted him to implement his learning from PD into his practise. Evan provided another example of when he worked with the travelling community how PD was beneficial in helping him run groups. As Evan stated

I massively see the advantage of having it. If anything, it should be strengthened. Being able to sit, listen and reflect, and speak when the time is right. That's the key for youth work, and working with challenging young people sometimes. It was very beneficial for me.

For Colm the relevance and benefit of PD was that as a young adult one begins questioning why they do the things they do. That in turns leads the SCLs/SCWs to reflect on young people's behaviour and perhaps see beyond the behaviour. Diana acknowledged how relevant and beneficial PD is for her personally when she

described how her practise relates back to her PD training. Diana explained that she is

Always questioning what I'm doing, why I'm doing it. I think I speak up a lot more now than I would have before doing PD. In team meetings I'll question everything and I'll challenge everything if I don't feel it's right for the client I will question it. I am watching much more what I'm doing, and what others are doing. On a day to day basis I think you learn that.

Grace found her PDG like "*mini sessions*" that "*would still highlight stuff for me*". Grace viewed PD as a wakeup call to look after herself and decided to be more open and desist from being very closed off. Hearing the views of others in PDG sessions also led to PD being beneficial for Grace. This is evidenced when Grace outlined

sharing in PD gets a few different things coming in and explored through like art and clay and different things like emotions are being explored. I think that's more valid going out, more real.

Paula believed PD is beneficial and relevant for those that wish to improve their sense of purpose or climb the career ladder. Declan explained how relevant and beneficial PD was to him personally when he stated "*it anchored you to your own personality and character*". Declan also expanded on the benefit and relevance of PD when he explained that he would have been unable to take on one of the most difficult roles in SCW if he had not experienced PD learning. Another benefit of PD for Declan and other participants was the confidence they gained within themselves and professionally. As Declan explained in this quote

personal development is the big one. That's the one that will define your self-assurance to go to some place new, with relatively little or no experience and have enough confidence to say, "I'm here, I'm willing to learn, and I'm prepared."

What PDG could do that no other module could, according to Jenny, was not to bring an agenda, just leave it open. The facilitator would just sit down and wait and this is where Jenny noticed the relevance and benefit of PD. As Jenny observed

You could feel it. You could feel the energy. Great. You could feel the uncomfortable agitation... [REDACTED] loves uncomfortable instances of agitation. It's the only way to learn, only way to change. Yeah

This completes Theme 5 which focused on participants' observations and views of the relevance and benefits of PD for SCLs/SCWs. This chapter will conclude with a summary.

7.7 Summary of Findings related to PEs

In summary, the findings from this chapter explain that PD was experienced as a unique experience, a safe space to explore emotions, strengths and areas to work on. Participants stated how they became more open, self-aware, learned boundaries and triggers. PD, according to participants, provided reassurance, space to self-reflect and gain self-respect. Other recollections of PD included learning how to ask for support and to listen more effectively, how to explore and implement self-care and recognise and manage how one's own experiences can impact practise. Managing loss and grief and gaining confidence and grounding are also recalled from PD learning.

For various reasons, sixteen of the twenty participants stated they would hypothetically choose, with varying degrees of certainty, a graduate with PD over theory. Three participants were torn between choosing between PD and theory agreeing that there had to be a balance between the two.

It was agreed by participants that learning did transfer from PD to practise. A number of participants acknowledged that they only employ or accept SCLs for PEP from LIT due to the level of work they have undertaken on themselves as a result of engaging with PD. According to the participants, it was deemed important to identify one's own baggage/triggers and deal with issues arising from this self-reflection and RP. Participants reported those without PD learning lacked the ability to self-reflect or request supervision or support. It was noted by participants, that colleagues without PD, tend to experience burnout as a result of that inability to open up about their practise and associated emotions and feelings and are more reactionary in their practice.

All participants either directly or indirectly impart their perception of the benefit and relevance of PD to them personally and professionally and the reasons for those perceptions. This next chapter presents the findings from the DA of twelve online solicited diaries kept by the respondents over a consecutive ten week period.

Chapter Eight: Findings from Online Diaries

8.1 Introduction

The previous chapter, the second findings chapter, presented the findings from twenty LIT SCW graduate participants, supervising PEP. Five major themes arising from data analysis were conveyed throughout that chapter. This chapter is the 3rd and final findings chapter, addressing the research question and the three sub-questions: “Is the PD module from LIT SCW HE programme relevant and beneficial for SCLs, SCWs and their PEP supervisors?”

- How are PD, SCW and PEP defined, conceptualised and operationalised?
- How do participants and respondents articulate the content of their learning and their experience of PD as a pedagogical and practice process?
- What role, relevance and benefit, if any, does PD have in SCW education, PEP and SCW practice?

The findings for this chapter originated from the data analysis of 12 solicited online diaries over 10 consecutive weeks. There were 84 anonymous entries from the 12 respondents. In this chapter, and to prevent confusion in the subsequent chapters, diarists will be referred to as respondents. Findings presented in this chapter include relevant quotes to exemplify the findings. This chapter represents a snapshot of a consecutive ten week period of SCW practise whereas the previous two findings chapter are lengthier since they cover a time span encompassing four years of PD learning and subsequent years of SCW practise, ranging from 6-15 years of experience. All the diary entries are anonymous. The subsequent chapter will provide discussion around all three findings chapters and the literature review chapters.

Reflective TA, as described in chapter five led to the development of three Themes. Spellings and grammar have not been rectified in order to keep the authenticity of the diary contributions. The three themes are:

- Theme 1 - What occurred to bring PD to mind

- Theme 2 - PDs contribution to SCW learning.
- Theme 3 - PD learning that transferred to practice

These themes arose from respondents describing the elements of PD learning relevant to SCW learning, what occurred, either personally or professionally to bring PD to mind, in addition to previous PD learning that assisted with those occurrences. The elements in the table below relate to what occurred for respondents to bring PD to mind and/or the elements of PD learning transferred to practice.

Table 2: Respondents and PD

Feelings	Self-awareness/	Self-care/	Supervision
RP	Boundaries	Assertiveness	Life story work
Relationships	Confidentiality	Loss and grief	Family
Emotions	Family Triggers	Mental Health	Confidence

The scope of this thesis only allows for the most prevalent topics to be presented here. Those topics are feelings and emotions, self-awareness and triggers, self-care and mental health, supervision, RP, assertiveness and confidence and contemplative practices. The raw and unedited quotes for each theme are provided to supplement and expand on the findings. Often a diary entry is applicable to a number of sub-themes which will be observable as the chapter progresses.

8.2 Theme 1: What Occurred to Bring PD to Mind

Within this theme respondents described what occurred, either personally and/or professionally, to bring PD to mind. These occurrences are related to feelings and emotions, self-awareness and triggers, self-care and mental health, supervision, and RP and are captured under corresponding sub-themes. Additionally, respondents

Feelings and emotions

Respondents described what occurred, either personally or professionally, to bring PD to mind. These descriptions included how being aware of, and recognising, their emotions assisted them to focus on the individuals they work/interact with. There was an ability to acknowledge and identify feelings and emotions, such as distress, attributed to the behaviour of others, whether SIB/CB. Stress and tension was claimed

to be related to family interactions. The respondents demonstrated an openness to discuss feelings and emotions in supervision but also with a colleague or group of colleagues. Feelings of anger and distress were also experienced when feeling overworked and somewhat exploited or manipulated. The following five quotes illuminate the above but also relate to family, assertiveness, grief and loss and supervision:

It reminded me to take time out and a deep breath. My car windscreen was smashed by a client and I was fit to really go at him But I stepped back and took myself on a time out.

Severe sib from an su that was very distressing to watch

Have been around family a lot this month and there is a lot of stress and tension

I was working long hours again this week due to a service user being discharged from Hospital. I had to sort out the paperwork and order the medication etc. On top of that I had to complete the work of my other colleague in what they only half did. I was angry that they are constantly doing this and I am constantly completing their work. I don't mind helping anyone but this is a regular occurrence. I am meeting my Social Care manager this week for my supervision and this will be discussed. I have to be professional but I will show my assertiveness as this issue is causing me a bit of distress.

Self-awareness and triggers

Respondents described what occurred, either personally or professionally, to bring PD to mind. Respondents demonstrated an awareness of their feelings and emotions which seemed to be the catalyst for self-care to be initiated. Being aware of their own emotions, respondents were capable of doing, when necessary, what was either in the own best interest or indeed the individual worked with. This awareness included being aware of the need to advocate for those individuals worked with as a result of engaging in their own RP. Respondents relied on RP and self-awareness to assess their work environment and look at their own personal and professional limits, actions and feelings and the reasons behind them. Self-awareness assisted respondents to be present in the here and now. Connected to this self-awareness were other elements as outlined earlier in this chapter, such as self-care, boundaries, assertiveness, confidence, RP, supervision and meditation. The six quotes below supplement this finding.

I had tried to help someone and then only after a lot of stress and anxiety and thinking of my training I noticed I need to mind myself in this.

Being forced to analyse my own actions, causes for those actions and feelings, and being able to bring in my self-awareness to help me do this.

Being aware of my personal and professional limits and what I consider to be a progressive and nurturing environment to work in.

I have been practicing meditation lately and really been aware of my own self-care, and in doing this process it also has helped me to be more vigilant of myself.

How striving for perfection is counter-productive.

PD assisted with me learning to be aware of my attitude towards situations.

Self-care and mental health

Respondents described what occurred, either personally or professionally, to bring PD to mind. Interactions with individuals attending services led respondents to value self-care and PD. Respondents seemed capable of recognising emotions, such as stress, anxiety, aggravation, irritability, mental and physical exhaustion, signifying that they were overextended and required self-care or time out. Since the nature of SCW is to work closely with others and is relationship based, there was a tendency to overextend and that continuous overextension was reported to lead to emotional and mental health struggles.

According to the respondents, whilst self-care can also be viewed as a selfish act they observed the benefits to them when self-care was adopted. The respondents believed the benefits of self-care can be noticed quite quickly, particularly, to an individual's head, mind and their practise. It seemed, to the respondents, that practicing self-care and meditation brings self-awareness into focus too. Knowing that self-care was necessary, relied on the respondents checking in with themselves and the feelings and emotions associated with being overextended and hence their need for self-care.

Respondents noted switching off for a few days allowed them return to work recovered and recharged. PD is credited with providing the tools to realise the issue and symptoms of being overextended and requiring self-care and also preventing burnout. These issues and symptoms included interactions with individuals worked with, tough and high pressured shifts, long hours, checking in with work and working when on

leave. Respondents believed that being recharged and “*out of the slump*” could lead to work output being three times more efficient. Self-care is interspersed with RP, boundaries, meditation, emotions and mental health. The following six quotes speak to this self-care and mental health topic.

The issues of self-care and personal development is very important to me due to the interaction I have with my clients.

Reflecting on my own personal self-care. I felt I was doing too much and needed some time for myself.

I was on holidays for a week and it was more active than a relaxing week away. I was getting messages to meet up with friends and work emailing me for the week and the following week. I felt I been rushed in the holiday and everything was beginning to bother me. After day 4 I was sitting down and said to myself that I'm on holidays, rushing around answering Tx and linking in with work- I was physically and mentally exhausted. I thought about what was said to me and our PDG in college that self care was very important to everyone of us. I had to start looking after me. I have to be a bit selfish in order to get my head back to some bit of normality. I decided to my own thing on holidays, cancelled meeting up with people the following week and I ignored work till I am back to work. My head started to feel better and now I was enjoying myself. Pd made me aware of looking after myself. I was away on a break for that but it didn't portray that way until I put into my Pd learning into practice. Thanks PDG and facilitator for this. I relaxed and enjoyed the second part of my holidays and started looking after myself



I needed to take a day to recover after a very tough and high pressured shift. I cancelled all my plans for that day.

I am working long hours the last week and I am beginning to feel tired, irritated and cranky. I need time to recover and look after myself. I thought about Pd and looking after myself. I have booked time off work to do this. Due to the nature of the work , you go way beyond of what is required of you. Only for Pd and what I learned from Pd I would seriously burn myself out in work and probably would be emotionally and mentally un well from it. Pd has given me the tools to notice these things and what I have to do to look out for my self-care.

I think having explored how not dealing with the "big story" can be detrimental to our physical and mental health, and that we have a responsibility to not just ourselves, but those around us and those we work with, to deal with any issues causing such anxieties.

Respondents described what occurred, either personally or professionally, to bring PD to mind. Respondents reported that supervision provided clarity and was helpful and therapeutic when utilised to explore issues respondents brought to supervision. These issues arose from the respondents own awareness, reflection and openness to discuss challenges and issues they had experienced. Supervision, similar to PDG was seen as a safe space to vent without requiring solutions. That said, respondents were aware that supervision required professionalism and on occasion, assertiveness.

Conversely, respondents providing supervision claimed to have learned the necessary skills from PD, skills of collaboration, professionalism, discussion, gaining consensus and that various perspectives are applicable to any issue. The ensuing four quotes illuminate this finding.

I found that my confidence had been affected by an on-going challenge I faced at work in relation to a relationship I had with a service user. I found that when I talked to my supervisor about it she allowed me to see the situation from a different angle. I felt I gained a better understanding from this supervision.

As i do alot of lone working at the moment, i found myself thinking that i dont have any an everyday group of work mates that i can moan and groan to. I think having at least one common person doing the same work, made me pick up the phone to my supervisor to have a chat about the workload.

I had supervisions with the health care assistants that I work with. They brought different issues up in the discussions. We collaborated all the issues and agreed what each of us have to do. By learning in Pd on how deal with people helped me to look at these issues in different perspective and to deal with them in a professional way.

My supervisor gave me an outside perspective on an issue I raised concerning my relationship with a client. It helped to see the situation from her perspective.

Reflective practice

Respondents described what happened, either personally or professionally, to bring PD to mind. Reflection and reflexivity were incorporated interchangeably and indistinguishably within the diary entries. When respondents referred to reverting to PD strategies to actively listen and deduct the most important issues from encounters they reflexively thought within that experience. This, they reported, is when they brought their own attitudes, thought processes, values, assumptions, prejudices and their usual way of practising into awareness and were motivated to understand their

complex dual role; firstly working with the individuals encountered in practice and then secondly their colleagues. There seemed to be a thinking from within the experience and a substantial amount of reflection in the moment while “*dealing with a client*” which could be viewed as both reflective and reflexive.

Reflection and reflexivity are demonstrated to be implicit when a respondent took the initiative to critically take context and relationships into consideration and raised them with their supervisor rather than merely reacting to them, with a view to finding ways of being and relating with and to others. The following five quotes expand on the above finding.

I was dealing with a client with myriad of issues and I had to revert back to my PD skills of active listening and deducting the most important issues. I had to do a debrief with my colleague and also to check in with myself regarding on how to proceed with the client.

My supervisor gave me an outside perspective on an issue I raised concerning my relationship with a client. It helped to see the situation from her perspective.

The use of identifying bad intentions vs bad behaviour.

Stress of college work made me reflect on PD.

Recognising how busy life can get I was able to take a stand back and see where I needed to focus on going forward.

Assertiveness and confidence

Respondents described what occurred, either personally or professionally, to bring PD to mind. PD was considered by respondents to have attributed to their growing assertiveness, confidence and self-esteem within their personal and professional lives. The following five quotes speak to this finding.

I needed to be assertive last week in a situation with another member of staff. In a particular situation regarding a service user I needed to speak up about what suits them the best, my co-worker felt differently. It took me a while to build my awareness that I needed to be more confident in myself and my work ability.

Self-esteem/confidence building

I work with autism and extreme BTC so being able to maintain a level head and accept that these behaviours are not personal is a great benefit.

When you begin a new post in a new environment you learn pretty quickly by watching the dynamics between staff, services users and management.

I felt I had given enough time in this particular role and found that while it was rewarding in its own way it was not the role I thought it out to be. At times it was unsafe, unstructured and under staffed. For this reason I have decided that I can no longer progress professionally in this role, that I need to move on.

This concludes Theme 1. This theme focussed on the occurrences that brought PD to the mind of the respondents. These occurrences brought a number of elements to mind including the following; feelings and emotions, self-awareness and triggers, self-care and mental Health, supervision and RP. The next theme focusses on the contribution PD learning made to SCW learning.

8.3. Theme 2: The Contribution of PD to SCW Learning

This theme focusses on the respondents' experiences around the contribution PD learning made to their SCW learning. Respondents reverted back to their PD learning in times of personal and professional stress or uncertainty. Elements of PD learning referred to by respondents as having contributed to SCW learning are contained in the table below:

Table 3: The Contribution of PD to SCW Learning

PD in its entirety	Recognising personal stress & tension	Recognising feelings and emotions	Recognising stressful situations	Recognising the need to talk
Assertiveness	Advocacy	Self-awareness	Empathy	Grief and loss
Active listening	Reflection/reflexivity	Overcoming mental blocks	Challenging behaviours	PD activities
Meditation	Family dynamics	Coping	People skills	Professionalism
Trust in supervisors/ supervisees and Previous PDG members	Group interactions and behaviours within various environments	Self-care and recognising signs of burnout	Personal and professional limits	Self-management and being in the moment
Facilitation skills	Confidence in self and practice	Collaboration	Maintaining relationships	Openness

Below, are 10 diary extracts, from a possible forty-eight, affirming some of the contributions that PD made to SCW learning referred to in the above table. Further elements of the contribution that PD learning made to SCW learning will also be observable through quotes under the subsequent theme. However, first the quotes for this theme.

The issues of self-care and personal development is very important to me due to the interaction I have with my clients.

Being with a large group of people for the week and how people interact and behave when in different environments.

A death of a young man a friend of mine knew. This brought me straight back to PD.

Being forced to analyse my own actions, causes for those actions and feelings, and being able to bring in my self-awareness to help me do this.

I have been practicing meditation lately and really been aware of my own self-care, and in doing this process it also has helped me to be more vigilant of myself.

I was working long hours last week due to an emergency at work. I was being to get Kranky at work and I realised I was drained and I wasn't taking care of myself. I took two days off to recharge my batteries and I am back to myself again. Learning through Pd about self-care I would probably be

still working and running myself into the ground but Pd gave me the tools to realise the issue and symptoms. I am back at work now recharged and working better again as if your fresh the work is no bother to you but if your over tired you're in a slump and it probably takes treble the time to get things done as opposed to bring fresh and alert.

I was just thinking it would be nice to be able to go into pd. I felt its so important to be able to have good quality people around you that want to see you do well.

I was in [REDACTED] training last week and one of the things we discussed was being assertive. I immediately thought of PD when we discussed being assertive. I had an advantage in this discussion as I learned assertive/ assertiveness in Year 3 in PD through our Personal Development group and in the lectures.

Using some of the listening skills and more empathetic skills during sensitive work meetings.

Being in the moment-learning to park other distractions/ annoyances/ excuses to be able to enjoy the here and now.

This concludes Theme 2. This theme focussed on the respondents' experiences around the contribution PD learning made to their SCW learning. Learning around PD in its entirety, self-awareness, self-care, RP, burnout, contemplative pedagogies, people skills, assertiveness, listening and empathic skills were some of the contributions PD learning made to SCW learning. The next theme focusses on elements of PD learning that transferred to practice.

8.4. Theme 3: Elements of PD Learning Transferred to Practice

Within this theme respondents described elements of PD learning that transferred to their practice and included feelings and emotions, self-awareness and triggers, self-care and mental health, supervision, RP, assertiveness and confidence and contemplative pedagogies.

Feelings and emotions

Respondents described how PD learning transferred to their practice based on what led them to think of PD in the first instance. Meditation to relieve anxiety and stress brought PD to mind and the memory of PD sessions whereby it was possible to unburden oneself to the PDG who were intuitive to feelings and emotions.

Stress and distress elements of PD were credited with widening the scope of the respondents' boundary setting, recognising their own limits and their ability to say "no" and avoiding unnecessary drama which consequently led to an enjoyable week. The respondents acknowledged that not only had PD provided the learning necessary to evoke the importance and capability of voicing feelings but also to keep empathy in mind for those who may have had more significant struggles. The ensuing four quotes illuminate this finding.

Looking at Murray Bowen in PD, and how families operated helped me see the possibility of how I may be manipulated into being an ally of a family member, who essentially messed up organising something, and in my opinion, couldn't see their role in the mess-up

I feel it was the stress and distress element of PD that came to play this week - because I have brought in a lot more measures of boundaries, taking on less, saying "no" more often, knowing my limits, not taking on other people's drama definitely allowed me to enjoy the week I have just had!

PD assisted in helping me to learn that I need to voice how I am feeling but also to be empathic to Others who may be going through a harder time

Being able to take myself out of a situation emotionally and make a decision about an SU based on their needs over my own emotional response.

Self-awareness and triggers

Respondents described how PD learning transferred to their practice based on what led them to think of PD in the first instance. An awareness of others' needs was important but not to the detriment of keeping one's own needs within their awareness. Also considered necessary was the ability to listen to themselves which in turn helped them recognise and understand their triggers.

Learning from PD was affirmed with the realisation that it is only possible to change oneself and not others. Furthermore, this learning extended to recognising when unexpected situations arose to resolve them as soon as possible to avoid

intensification and toxicity, this also avoided respondents bringing this event home and it becoming muddled in the mind over time.

Possessing a high level of self-awareness led to understanding when behaviours change in a group that it is not personal but the individual/individuals way of communicating where they are at personally. Thus, allowing the work to continue unimpeded in order to check in with the group member/members. Respondents also acknowledged the necessity to look and to listen deeper in order to discover what has not been verbally communicated. As outlined by the respondents, this level of listening and looking required self-awareness.

Self-awareness was required to know when one's own limits were reached and when to say "No" in order that one's own mental health was preserved. PD was noted by respondents for highlighting self-awareness. Moreover, PD provided the knowledge to respondents on the importance of checking in with themselves after every encounter with individuals or incidents. Respondents reported that checking in with themselves to avoid having a reactionary response to an incident relied on self-awareness.

Self-care was observed by respondents as a bi-product of self-awareness. This self-awareness provided the impetus to set boundaries around work schedules and taking time-out for self-care. Another by-product of self-awareness was recognising when supervision was required. The respondents' self-awareness to examine specific personality traits led to their forward thinking and questioning what could be deficient in their experiences of work if striving for perfection in the work persisted.

Self-awareness, with undertones of reflection, often led the respondents to activate self-care skills. This level of self-awareness brought to mind both the need to be more time-efficient and feelings of stress and anxiety, which in turn, led to reaching out and talking with others. Reaching out and talking, included seeking assistance from a supervisor which led to positive outcomes. Recognising the need to take time off from work resulted in employing self-care strategies that led to rest and refocussing. The following six quotes illuminate the above but also relate to other topics of self-care, burnout, RP, supervision, emotions and feelings.

Being mindful of their needs but also keeping my needs in my mind also I was able to listen to myself and understand my triggers.

Understanding that the behaviour of people in groups can change in a flash, but recognising that it's nothing personal against me, it's just where the group members are personally, but still being able to reach out to them to make sure they are OK.

I scheduled where I was going to fit in the college work in the evenings, along with paper work for work. I stuck to this schedule and once a certain time hit in the evening I stopped and did something relaxing. Self awareness was really important last week and from that so was self-care. I realised I need to look after myself so I don't burn out.

PD helped to recognise self awareness and when i need supervision and when i need to undertake self care the most.

I was reminded that in trying to be a perfectionist, or putting such high standards on myself, that I was going to lose the joy of the process, and may end up hating what I'm doing, because I'm making such hard work out of it!

At the beginning of last week I realised that I needed to be more efficient with my time. I planned out what work needed to be done and tried to stick to that routine. I had to use self-care skills during the week and to be aware that I was feeling stressed and anxious. Speaking to people that I was close with in my Masters helped me a lot and I made sure to take the weekend off after the exams to rest and focus on myself. I also asked for help from my supervisor for my thesis and once I had discussed the issues with her I felt a lot more positive.

Self-care and mental Health

Respondents described how PD learning transferred to their practice based on what led them to think of PD in the first instance. As a result of PD, respondents reported that they became more knowledgeable, and had an awareness of self-care. PD learning was credited with teaching respondents' self-awareness and recognising the need for self-care whereby contemplative techniques were also utilised for self-care purposes. The knowledge that self-care and the awareness of boundaries are essential to SCW practice was also acknowledged. Despite having graduated a number of years previous, PD learning around self-care was recalled. Also, the need to self-care following difficult interactions was noted.

Respondents reported that self-care can also be achieved when self-awareness is activated. Self-awareness and self-care was recognised when examining and rationalising that exhibited behaviours are not exhibited to intentionally cause pain or distress. This learning was reported to have been discovered in PD, in particular during the work around family dynamics.

The need to be assertive enough to articulate what is causing stress was recognised by respondents as having transferred to their practise. This ability to be assertive provided the tools to incorporate self-care in order to avoid burnout. Good quality self-care is attributed to remaining focussed on the important things in life. PD learning around self-care has transferred to practice by serving as a reminder to take time out and implement self-care in to one's day.

The analogy of the empty pot or well were brought to mind from PD learning and transferred to practice. This transfer to practice is from the perspective of the impossibility to care for others if our own pot or well is empty and how that pot must be refilled. This is achieved through engagement with enjoyable activities to aid relaxation and bringing the positives back in focus and putting oneself first.

Respondents reflected with a direct purpose in mind, such as ensuring professional boundaries and expectations are achieved and maintained. The purpose of reflection, according to the respondents, was to ensure a positive mindset, but also to notice and bring about change when the mindset was no longer positive.

Reflection, as a result of PD learning, proved to be useful for taking a step back and discovering where focus was required before progressing further. This entailed being assertive, in addition to, reflecting on how an approach taken worked, or in some instances, did not work, and re-evaluating how a firmer approach was required to ensure compliance was achieved.

Personal reflection, when aggrieved by another family members' actions, led to realisations around what one is experiencing and needed. There was an acknowledgement that self-care was necessary at this time which led to the conceptualisation of the other family members grief which, somewhat, eased the respondents' sadness. The learning from PD brought the knowledge of the various reactions possible but also the roles family members adopt.

Reflexivity is apparent when respondents pre-empt how an individual worked with may feel when the SCW moves on and implementing thought out strategies to ease or prevent the individuals distress. Reflection led to respondents seeing the bigger picture which involved boundary issues. Reflection from PD learning aided PBL as a result of having experienced a similar task during PD.

Again, a number of other elements of PD learning such as self-awareness, RP, contemplative pedagogies, boundaries, assertiveness, loss and grief, family, emotions/feelings, self-awareness, PBL, burnout and supervision are embedded in a possible twenty quotes. The following six quotes speak to the above finding.

My previous PD learning brought self care to light as it's been 3 years since I last engaged in personal development.

I was able to understand that I need to make some changes on a personal level for my own mental health.

By drawing up a plan, Gant-style, is imperative to maintaining good quality self-care, and helps me focus on the necessary things in life.

I kept in mind all week what I learned in PD about self-care and self-management and ensured that I took time for myself.

PD taught me that you cannot care with an empty flower pot. You need to replenish your pot so that you can care again. This means doing things that you enjoy, relaxing and focusing on the positives.

Brought to my awerness the importance of looking after number 1 and filling the well.

Supervision

Respondents described how PD learning transferred to their practice based on what led them to think of PD in the first instance. Learning to be open and honest in supervision was attributed to PD and consequently, supervision provided reassurance which boosted self-confidence around practice.

Also, attributed to PD learning was knowing when supervision was warranted and how to request it. Supervision could be sought following an intense piece of work, seeking clarity on viewpoints and relationships. In addition to knowing when supervision should be requested, PD learning affirmed how to articulate and express feelings in supervision.

Additionally, having an agenda prepared prior to supervision aided and prioritised discussion of issues concerning practice thus receiving different perspectives and clarity around practice. The four quotes below attest to this finding but also make reference to other sub-themes namely confidence, RP and self-awareness.

PD taught me to be honest and open in Supervision which led to a lot of reassurance for me last week and allowed me to regain self confidence in my work.

I was having a heavy and intense session when working with a young person . I reached out and looked for supervision session for myself.

After a conversation with another member of staff, I reflected on how it went and realised that I didn't agree with what the other staff member was saying. I discussed with my supervisor and she reminded me that I know this service user the best and therefore I need to be able to stand up for what I believe is the best treatment. Self-reflection and supervision (learned in PD) were really important for me last week.

I had learned to prepare an agenda so I knew what I had to discuss before going in. I also knew to prioritise this issue as it was affecting the way I worked and that an outside perspective on the issue can provide clarity or a new way of seeing things.

Reflective Practice

Respondents described how PD learning transferred to their practice based on what led them to think of PD in the first instance. Learning about reflection from PD was implemented around practice but also around being overextended at work which prompted personal self-care to be activated. Reflection was assimilated following debriefing but also as a self-check-in on how to proceed with an individual in practice.

RP was channelled when respondents recalled the benefits of PDGs, particularly when the need arose to offload to a group that understood feelings and emotions which had been activated through utilising PD to reduce stress and anxiety. A respondent, recounted how reflection on a conversation with a colleague resulted in the realisation of dissatisfaction with a colleagues viewpoint. Clarity was provided when the opposing viewpoints was brought and discussed in supervision. Also, worth noting is how reflection can lead to more than one conclusion as a respondent demonstrated their need to have asserted themselves with their colleague or that their opinion should have been considered.

PBL and RP was incorporated to apply theory to a real life event evidenced when a respondent compared the work of a theorist and its applicability to their own lived experiences. Furthermore, this learning extended to include, from PD lectures, the

ability to identify each family members role within their own family which was built on by devising interventions suited to meet the needs of families in practice.

Reflection supported a respondent to conclude that PD learning was not relevant that particular week although possible PD learning may have corresponded with creating a striving mindset. Broader reflection is evident when a respondent noted not addressing one's life story in a meaningful manner can have serious consequences on both our mental and physical wellbeing. They also acknowledged our collective responsibility to address our life story and any issues such as anxiety arising, not alone for ourselves but for the individuals and colleagues worked with.

Engaging with RP led to the identification of the personal changes required to preserve mental health. PD learning was credited with having brought reflection into the respondents' awareness and also with what was required retrospectively for self-care in order to transition from that place of work to relaxation and rest.

The ability to use RP is credited to PD; the respondents claimed that without PD they would not know how to engage with, or understand the importance of, RP for the betterment of the practise delivered to individuals worked with and for. The following five quotes speak to this;

It made me more aware of reflection and understand what I needed to do for self care even though I was leave the organisation I knew I needed to express myself to move on properly.

I wouldn't know how to really use reflective practice if I hadn't done PD, and the importance it plays in bettering myself to providing better services to the people I work with and for

My learning in Pd was I can't change anyone only myself. I also learned in Pd with situations arise to deal with them straight away and not to let them fester or get worse as before I would take it home and let the situation muddle my mind over a few days.

My supervisor gave me an outside perspective on an issue I raised concerning my relationship with a client. It helped to see the situation from her perspective.

It gave me the sense of having previous experience with the task at hand.

Assertiveness and confidence

Respondents described how PD learning transferred to their practice based on what led them to think of PD in the first instance. Assertiveness was noted within practice especially advocating on behalf of an individual worked with but also assertiveness to convey feelings, thoughts and ways of working to colleagues. The ability to take a step back when, for reasons of physical or mental health, interactions were not in the respondents' best interest, such as contact from colleagues when on leave. Self-awareness and confidence were relied upon when respondents had to advocate for individuals they work with. Also, confidence to cancel plans in favour of self-care was reported by respondents. Confidence to not only practice but to take on tasks such as debriefing colleagues and providing supervision for other professionals. Confidence to take on new roles with different organisations.

Assertiveness has another aspect, good communication and active listening was observable when respondents noticed staff dissatisfaction, preventing hostility arising when there was open and honest communication. In addition, assertiveness was valuable when undertaking further training, also, adopting listening skills and more empathetic skills during sensitive work meetings. The following five quotes speak to the above finding.

Without PD I wouldn't have the confidence to speak to people let alone speak about how addiction affected my life in a group setting.

I had to be assertive in work this week. A service user was submitted to hospital and staff were giving out why do I have to go to the hospital. I explained the situation that we all had to do an extra bit to help out but they still weren't happy. I thought to myself that I have to be a bit tougher and I called all the staff and told them that this is a management call and it's their duty of care to fulfill it. Everyone then said no problem, yes we will do it. So I thought about assertiveness in PD and it worked. If I didn't have the knowledge of assertive/assertiveness I do honestly feel there would be hostility in the team as why am I being sent and not so and so and nothing would have been achieved for the service user. I'm grateful that this piece of Knowledge learned from personal development saved me a lot of bother in my work.

I was in [REDACTED] training last week and one of the things we discussed was being assertive. I immediately thought of PD when we discussed being assertive. I had an advantage in this discussion as I learned assertive/assertiveness in Year 3 in PD through our PD group and in the lectures.

Even though I left my previous job. I made an appointment with my manager to voice a few concerns I had dealt with on a personal level. I felt this made

more confident in my self that I was able to voice my concerns in a professional level and it did not escalate

That I have to be assertive and not to bottle things up in my head that cause me stress. I have learned from Pd to look after my self care that I dot become burned out

Contemplative pedagogies

Respondents described how PD learning transferred to their practice based on what led them to think of PD in the first instance. PD was acknowledged for the learning gained around mindfulness and meditation and the ability to notice when “*drained*” which perpetuated meditation and mindfulness being incorporated into respondents’ self-care routines. Focussing on the “*here and now*” was also attributed to PD. Being aware of the self through meditation and the need for self-care was also attributed to PD learning. PD was also brought to mind when incorporating meditation to “*relieve anxiety and stress*”. Mindfulness and meditation from PD led to an ability to self-care and be assertive. The following five quotes speak to the above finding with elements of other sub-themes discernible, such as self-awareness, self-care, assertiveness, feelings and emotions.

PD taught me to be self-aware and last week I was aware that I was drained. I used mindfulness and meditation techniques in my self care.

Being in the moment - learning to park other distractions/ annoyances/ excuses to be able to enjoy the here and now.

I have been practicing meditation lately and really been aware of my own self-care, and in doing this process it also has helped me to be more vigilant of myself

I started meditating which really helped relieve anxiety and stress. this reminded me of PD sessions and being able to offload to a group whom understood the feeling and emotions.

Was in a position to be assertive and to mind my self through mindfulness and meditation

This concludes Theme 3 and the chapter will conclude with a summary. This Theme focussed on the respondents detailing their views of the particular elements of PD that transferred to their practice. These elements included feelings and emotions, self-awareness and triggers, self-care and mental health, supervision, RP, assertiveness and confidence and contemplative pedagogies.

8.5 Summary of SCW Respondents' Findings

In summary, the findings outline how respondents revert back to their PD learning during their practice but also for personal reasons. PD has been described as transferring to SCW learning and also to practice. PD has been portrayed in various ways by respondents as being beneficial to them in practice but also personally. This has occurred in the following ways. The respondents were aware of their feelings and emotions and are open to discussing these in supervision. Supervision is relied upon to talk about concerns and to actively seek opposing views to their own. Recognising the need for supervision is also related to RP and self-awareness. Respondents reported that they are also very aware of the dangers of burnout and their own mental wellbeing. Contemplative pedagogies and other self-care strategies were implemented to recognise triggers and prevent burnout and mental ill-health. Assertiveness provided respondents with the confidence to address concerning issues within practice. The next chapter will discuss the findings from chapter six, chapter seven and chapter eight in conjunction with the relevant reviewed literature from chapter two, chapter three and chapter four.

Chapter Nine: Discussion

9.1 Introduction

The previous three chapters presented the findings from twenty-one LIT SCW graduate participants employed as SCWs, twenty LIT SCW PE participants supervising PEP and twelve LIT SCW graduate participants employed as SCWs who kept an on-line solicited diary for ten weeks. This chapter will include, under Theme 2 and Theme 3, two visual models, derived from the three findings chapters. Figure 2 depicts the contribution PD makes to both SCW and supervision and Figure 3 depicts the inter-relationship of personal development and social care. A discussion of the findings, in conjunction with literature reviewed in chapter two, chapter three and chapter four, will ensue.

A reminder of the overarching research question: “Is the PD module from LIT SCW HE programme relevant and beneficial for SCLs, SCWs and their PEP supervisors?”. The sub-questions are:

- How are PD, SCW and PEP defined, conceptualised and operationalised?
- How do participants and respondents articulate the content of their learning and their experience of PD as a pedagogical and practice process?
- What role, relevance and benefit, if any, does PD have in SCW education, PEP and SCW practice?

These research questions will be kept to the fore of the discussion. Following the insertion of the Maughan model of the inter-relationship of personal development and social care work, the chapter will be laid out according to the corresponding themes from the previous three findings chapters.

- Theme 1: SCLs and PEs experiences of PDG.
- Theme 2: The contribution of PD to SCW learning.
- Theme 3: Elements of PD Learning transferred to Practice.
- Theme 4: SCW practice without PD learning.

9.2 Theme 1: Social Care Learners' and Practice Educators' Experiences of PDG

This section of the discussion is particularly relevant to the following sub question; How do participants and respondents articulate the content of their learning and their experience of PD as a pedagogical and practice process? The main thrust of this section is on how SCW and PE participants describe their initial struggles engaging with PDG. PDG was considered the embodiment of the PD module.

The early stages of PD learning

Overall, PD was reported as being an individual and unique experience, challenging, a safe space to explore emotions, strengths and areas to work on. This is somewhat contradictory to Moller and Rance's (2013) findings when the PD module is experienced in its entirety. Moller and Rance (2013) found their participants experienced a sense of uncertainty during PDGs when expectations of what was expected of group members were unclear or non-existent. Further uncertainty features are centred on the unpredictability of what will arise, how to respond to it, and how those responses will be perceived. Also noteworthy was *"the potential for the PD group to be a distressing experience"* for their participants. However, if comparing duration of PD engagement from their study, with how participants experienced the early years of PD in this study, then there are more in common with Moller and Rance's (2013) findings than appear at first glance. Participants of this current study experienced a number of real and perceived barriers preventing initial engagement with PD. In agreement with Moss (2012), groupwork stages contribute *"useful concepts which provide insight into how groups often evolve and develop their own characteristics as they continue to meet"* (p. 144). As can be discerned from the findings, it is rare for groups or group members to go through the same stages of group development in exactly the same way. The real and perceived barriers experienced by PDG members in the early stages of PD included:

- Being guarded until comfortable and until trust was attained within the group
- Feeling daunted and experiencing fear and lack of understanding about what PD entailed and its purpose
- Being sceptical of the relevance and benefits of PD
- Being unsure where the boundaries between PD and counselling lay

- Experiencing uncertainty relating to how much to share with the group
- Being uncomfortable with groups changing annually
- The facilitator not being emotionally and physically present.

Overall, it would seem PD was the cause of much anxiety, particularly in the early years of PD and pre PEP, with some participants recounting the insignificant amount of learning they gained from 1st and 2nd year PD. Ohrt et al., (2014) and Payne (2001) provide a solution to combat this negligible amount of learning. They state cohesion and the necessity of creating a safe and trusting environment, whereby group members feel a connectedness and openness to other group members, is necessary for PD to occur. A safe and comfort-inducing environment and collective high levels of engagement by all group members, coupled with beneficial feedback and exchanges, may also entice members to contribute on a deeper level. This engagement then provides the opportunity for meaningful connections with the potential to experience feelings of acceptance.

Retrospectively, the participants realised they were learning in PDG, with a small number of participants certain that nothing tangible was gleaned from 1st and 2nd year PD. This in part could be due to facilitation techniques such as coercive techniques (Benson, 2010; Walsh and Andersen, 2013; Harris, 2014). Additionally, the length of time it may take participants to feel comfortable and trust their group members. Also, other factors such as feelings of shame (Rogers, 1957; Germer and Neff, 2019; Siegel, 2007) could possibly feature in the initial hesitancy to engage with PDG. Another possible factor is how SCLs were socialised as children around expressing their emotions which may have effected how they engaged with PD. The participants' descriptions of their early PD experiences have much in common with the findings of Markus and Abernethy (2001) who report hesitancy to engage in PDGs can be traced to group members underlying anxieties around participating in group and risking emotional/affective dysregulation. Similarly, Lindsay and Orton (2014) confirm, group members may be scared, uneasy or anxious at the beginning phase of their group, resulting in uncertainty about what will transpire or be expected of them. This has some correlation too with Cottrell (2003) who studied the attitudes of learners in relation to the PD process and found that they may not always find PD to be beneficial and avoid actively engaging in this process. This in part can be agreed upon particularly during the initial stages of PD at LIT. Daloz (1986) is in agreement with

Rogers (1961) and Markus and Abernethy (2001) in recognising that growth can be risky. This becomes evident as learners are facilitated to release their hold on old conceptualisations of self and the world which coincides with socialisation effecting SCLs engagement with PDG. Furthermore, as Nadan and Stark (2017) recognise, learning activities that uncover unwanted or disturbing thoughts and emotions may be rejected or attempts made to discredit them. Lindsay and Orton (2014) also confirm PDG members may struggle with these disturbing thoughts and emotions at the outset of PD. Rogers (1961) also held the view that perceived threat to self or if the individual feels exposed and vulnerable may lead to them becoming blocked from participating which speaks to the participants being guarded, daunted, fearful and uncertain.

All of the above observations were described by the participants. In particular, they used terms such as “guarded”, “daunted”, and “fearful” until they became comfortable and trust was attained within the group. In agreement with Rose (2018), it appears *“Challenging our ingrained ways of thinking is always difficult and requires sustained effort”* (p. 6). Hence, the benefit and relevance of providing PD learning for a sustained period of time. What is not made wholly clear in the literature is that this amount of agitation is normal, expected and necessary for PD and growth to occur. Without a certain level of uncertainty and agitation, the PD journey has the potential to be a tick box exercise. However, participating in check-in can ameliorate some of the uncertainty and agitation and lead to, or increase *“peer validation”* as individuals recognise they share similar struggles with other group members (Clemans, 2011, p. 122). The participants’ lack of understanding at the outset of PD regarding what PD entailed and its purpose shares similarities with the Lucas et al., (2004) and Moller and Rance’s (2013) studies when they found participants’ clarity about what was expected of them as group members was unclear or non-existent. I also expect lack of understanding about what PD entailed and its purpose does not necessarily signify PD and its purpose had not been explained, it is more likely the group members did not have points of reference in their experiences to draw upon. Sometimes the reasons for misinterpretation can also be quite straightforward such as uncertainty on where the boundaries lie between PD and counselling and uncertainty relating to how much to share with the group.

PDG Facilitation

Facilitation techniques will most likely feature in how participants engage and adapt to their stirred-up feelings and emotions. Mezirow (1997) describes a transformative learning environment, which exactly mirrors the PD environment, as one in which learners have full information, are not coerced, have equal opportunity to participate, can critically reflect on assumptions held, are empathic and are good listeners, with a willingness to seek common ground and synthesise conflicting points of view.

All participants in this study found PD relevant and beneficial in their 4th year. Many regretted they had not taken PD more seriously in the previous years. As some participants remarked, it was only having completed PD learning and subsequently engaging in SCW practice, that retrospectively, they realised they had been continuously learning from PD without realising it. PD learning was consolidated in 4th year when all the participants reported the entire PD experience was relevant to them both personally and professionally. For some participants, this consolidation was realised when connections were made to their SCW practise and following (usually the 2nd) PEP. What is unclear is whether PD was the catalyst for gaining deeper insights into SCW practice, or if having engaged with PEPs and experienced SCW practice that PD then became more relevant. Ryan and Deci (2018) are of the opinion that intrinsic motivation must be present within the individual and aligned with their psychological needs in order to achieve basic personal development and self-regulation. There is a paucity of studies examining PD experiences over a four year period. Hence, the impossibility of comparing the participants' experiences with other research. None of the studies reviewed in chapter three had studied or provided PD learning for the duration of four years. Consequently, this is a unique study since most HEI's providing PD or similar, provide the module mostly for a semester and at most as a yearlong module. LIT is the only HEI providing PD as a standalone module for SCWs in Ireland.

PD and PEP

I am inclined to believe completing just one PEP was sufficient to awaken the PD learners to the relevance and benefits of PD learning to their practice. Additionally, I believe the levels of difficulty experienced during PEP may correlate to the SCLs appetite for engaging with PD. Furthermore, it may also be possible that any PD like practices witnessed during PEP among supervisors and staff became ingrained in the SCLs behaviours and subsequent practice. Many of the PEs declared their preference

for accepting SCLs exclusively from LIT and therefore the chances of observing PD in practice seems quite likely. Interestingly, participants explained the more they engaged with PD the more learning and insight was gained. It appears that for many participants, having completed their PD learning and engaged in practice is when they began to realise how much PD learning they had achieved. Surprisingly, participants acknowledged the benefit and relevance of PD learning to them long after they had graduated and begun working in SCW practice.

PD was also experienced by a number of participants as providing the opportunity to gain a better understanding of what others are going through rather than being totally focussed on their own lives. This mirrors what Moller and Rance (2013) and McMahon and Rodillas (2020) found in their respective studies, particularly with regards to noticing reactions to others and utilising thoughts and feelings to recognise underlying issues (ICERI 2022 paper)

. This empathic assertiveness was considered one of the positives of PDG. The words “*great*”, “*fantastic*” were attributed to PD by participants of this current study. PD was recognised by participants as the beginning of their questioning; in other words asking “why ?” more. Four years of PD learning gave participants time to examine self in depth and detail. Overall, it would seem this element of the discussion may somewhat address the concerns of Kivlighan III et al., (2019) who found much of the literature on PD /experiential groups concludes that, despite insight into these groups outcomes, there is a requirement for research to examine what are the processes these groups experience that can be connected to attaining development as a learner. These processes can be summarised as follows: the process and thus subsequent experiences of PDG members are individual and unique to them, and seem to rely on timing and to emerge at the pace of the group member. There is no magic process that brings the aha moment of understanding to group members. That aha moment of understanding and internalisation of PD depends solely on what resonates with the participants at any given moment. For some participants, development as a learner began during their first but more commonly second PEP; though often only realised retrospectively or by PEs who exclusively accept LIT learners for PEP due to the level of their PD. As many opportunities as possible should be provided for PDG members to increase their chances of aha moments or insight. It is possible the reason some participants engaged with PD learning earlier than 3rd year and/or 4th year is that some

activity or occurrence in PDG provided that individual with an aha moment or moment of insight.

What is apparent from this research is the necessity to provide PD learning beyond two years. One wonders if the first two years of PDG had been more intense in terms of material covered, would participants have engaged sooner or would they have resisted the entire PD process due to it being too intense too soon? The findings of this research would have been very different had the research focussed solely on the first two years of PD learning. It also seems the more interactive the participants were in their PDG the more relevant and beneficial PD became to them. Relevance and benefit seem to stem from the lengthy duration of PD learning. All participants attained development as a PD learner in their 4th year of PD and this was solidified further once working in practice.

The next section of the discussion is concerned with the contribution PD makes to SCW learning.

9.3 Theme 2: The Contribution of PD to SCW Learning

This next section of the discussion is concerned with the contribution PD makes to SCW learning and further addresses the concerns of Kivlighan III et al., (2019) who seek research to examine what are the processes groups experience that can be connected to attaining development as a learner. Furthermore, this section of the discussion focusses on sub-question 3: What role, relevance and benefit, if any, does PD have in SCW education, PEP and SCW practice? A visual synthesis of the contribution PD makes to SCW and supervision will also be provided.

The contribution PD makes to SCW learning

PD learning refers to tacit or latent knowledge, in other words, each participants and respondents' frame of reference under which new knowledge, not necessarily theoretical knowledge, is assimilated. As outlined in the findings chapters, it is not always possible to separate PD learning from SCW practice since both are intertwined in the participants and respondents' narratives and experiences. Sometimes, as the findings show, these experiences were only discovered post-qualification; hence, the entanglement of SCW learning with SCW practice. Components of PD learning pertinent to SCW learning will be discussed, incorporating RP, triggers, supervision, self-awareness, self-care and PEP.

SCL and PE participants expressed how examining their life experiences in PD transcended what lectures, tutorials and theories could provide. Many participants and respondents believe without PD they would find it difficult to carry out their SCW duties to the standards they currently maintain. This cements the views of Lui and Yin (2010) who consider interpersonal skills equally as important as theoretical knowledge for learners to develop. They judge HEI's as having a duty to not consider learners as "*empty computers*" enrolled solely to gain the latest cutting-edge knowledge (p. 111). Many of the current participants and respondents believe that without PD they would not be working in the area they are currently employed in. All participants and respondents are aware of how competent they are, and they name elements from PD which assist them maintain that level of competency such as recognising and knowing how to manage their triggers and engaging in regular RP, supervision and self-care. PD assisted participants and respondents to sufficiently develop their self-awareness to recognise their triggers and when self-care, support or supervision was required.

Personal Development modules provide the backbone for Social Care Work and Supervision

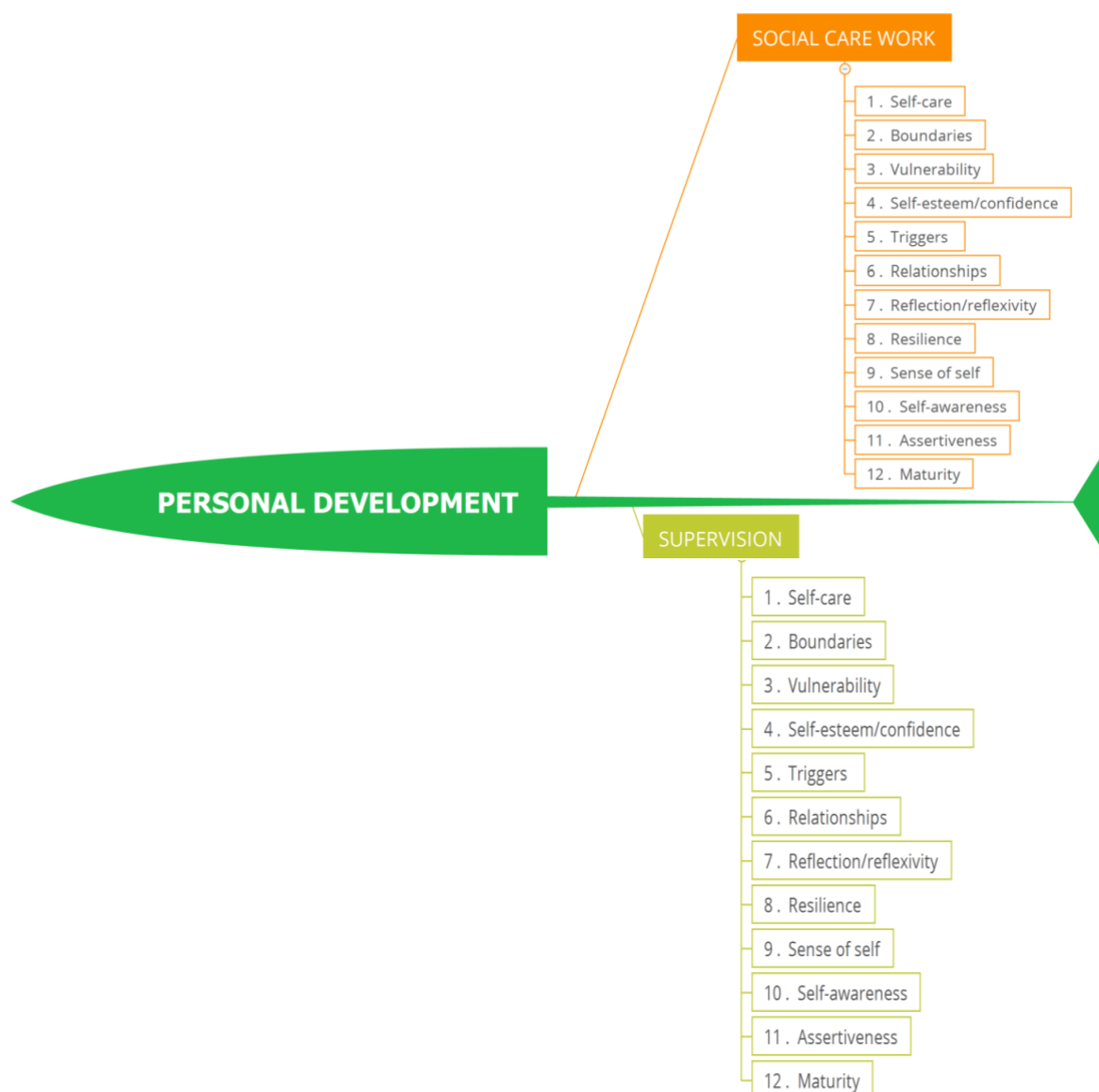


Figure 2

The findings in this section compare favourably with “The National Strategy for Higher Education to 2030” which classifies a number of high-level objectives for the Irish higher education system. One of those objectives is “*Students will experience an education that is excellent, relevant and responsive to their personal development and growth as fully engaged citizens within society*” (p. 27). This somewhat negates the views of Lucas et al., (2004) when they express that a gap can exist between HEIs descriptions of skills development and the understanding of this by the learners. PD

learning has been identified in the findings as sufficiently flexible to transfer professionally to various SCW organisations whilst also being of benefit to participants and respondents personally. Similar to the findings of McMahon and Rodillas (2020) the participants and respondents from this research acknowledged the benefit and relevance of PD professionally and personally which also correlates with the findings of Moller and Rance (2013). These findings include the high value placed on PDGs for increased self-awareness, self-acceptance, awareness of judging others, and functioning fully or as a “whole” person or in the words of Roger’s (1961) a fully functioning person. Noticing reactions to others and utilising thoughts and feelings to recognise underlying issues were also considered the positives of PDG. Unanticipated personal triggers and vulnerabilities could be revealed during PD, and this was deemed essential for practice. Bearing witness to group members various views on issues opened up possibilities to further understand the individuals worked with. Learning the impact one has on the group assists with considering and knowing the impact one has on the individuals worked with.

From the findings, the structure and content of PD seems to have created the opportunity for participants and respondents to develop confidence in their practice by providing them with tacit and latent learning, individual to each participant and respondent, whereby they can revisit time and time again to anchor or centre themselves to their practice. This impression is echoed by the findings from Williamson-Ashe and Ericksen (2017), in which group members found the small group process productive and rewarding. It enhanced the learners’ decision making and problem-solving abilities. Learners self-reported that working in a group improved their achievements and that working with their peers was an important skill. The same can be said for Ohrt et al., (2014), when they conclude group members gained insight into their own personal self-awareness and their strengths and limits. Furthermore, they stressed that their participants’ ability to lead groups was related to the development of improved empathic skills. Participants who participated in a PDG experienced significant increases in their belief in their competence and ability to set personal goals and experienced “therapeutic factors” which is similar to the experiences of participants and respondents in this current study which include the ability to self-care, engage in mindfulness and meditation. It is possible that Ohrt et al., (2014) conclusions could be further enhanced by providing PDG for more than one semester. Respondents in this current study did not make any specific reference to relying on

theoretical knowledge to guide them through difficulties with individuals worked with. However, there are two possible elements of theoretical learning that may solidify the participants' and respondents' learning and subsequently their practice and they are RP and relationship building. LIT (2014) conducted a survey looking at SCLs satisfaction with the SCW programme. PD and PEP were deemed to be the most important modules for SCLs and that there was strong support for the PD stream of modules to continue over four years on the programme. Similar to McMahon and Rodillas (2020) graduates participating in the LIT (2014) study emphasised the need for more PD on the programme.

The contribution PD makes to PEP

The reasons, according to the PE participants, that applicants with PD learning were accepted for PEP and /or employment included, having an awareness of their own experiences that allows them to empathise with individuals worked with and their experiences. For the most part, PEs, given a choice between taking SCLs for PEP or employing SCW's with either PD learning or theoretical learning would choose the applicant with PD learning. This contrasts sharply with the view that the majority of SCW participants held; they believed that PD had little or no relevance or benefit to them during their PEP, particularly their first PEP. Yet, PE participants would overwhelmingly choose the SCL with PD learning and have listed a number of traits PD trained SCLs bring to their PEP (see appendix O). It was thought those with PD learning brought RP and an added level of ability. This ability included being empathic, knowing when to speak/be silent, reflect on the work, seek support or supervision, took criticism as a learning moment and developed working relationships quicker than their counterparts without PD learning. Dustin's (2006) study, similar to PEs, found managers valued practical knowledge over theory. Hicks (2016) claims social work has a problem with theory, with the difficulty quite possibly relating to what counts as theory, since there are many conceptualisations of theory. A possible solution put forward by Rigaud and MacGowan, (2019) are paradigms that are cognisant of the individuality and uniqueness of individuals may be considered a better fit than theory alone.

The contribution PD makes to SCW practice/practise

All the participants and respondents outlined, with examples, the contribution PD makes to their SCW practice and practise. The reasons applicants with PD learning were accepted for PEP and /or employment include, having an awareness of their own experiences allows them to empathise with individuals worked with and their experiences. Just as important, it is recognised from the findings of this current research, having PD learning safeguards the SCW too. Safeguarding the SCW occurs particularly when the SCW knows, through engagement with RP, self-care and supervision, their own boundaries, vulnerabilities and limitations. Specifically, those engaged with RP, self-care and supervision have an extra protective layer. If their line manager is not fully committed to SCWs wellbeing, then the SCW can alert the line-manager to their need for support and time for self-care. Interestingly, literature reviewed for this current work did not report on PD as a protective endeavour for PD learners as they progress to SCW practice. This may be due to the dearth of literature following PD learners to practice. Kohlstaedt (2010) and Heydt and Sherman (2005) understand that self is the main way or means a practitioner has to facilitate change which is generally the aim of SCW intervention. Heydt and Sherman (2005) understand that

the conscious use of self purposefully and intentionally allows for his or her motivation and capacity to communicate and interact with others in ways that facilitate change ...the skilled worker is purposefully making use of his or her unique manner and style in relating to others and building positive helping relationships with clients is fundamental to ... practice (p. 25).

The primary task of SCW is to form therapeutic relationships with the individuals worked with in order to bring about change. It was thought that sometimes building the therapeutic relationship is the intervention.

Adequacy of theory for SCW practice

PD from this current research was seen by participants and respondents as essential for understanding the lived experiences of individuals encountered in the course of their SCW practice, something not considered attainable from traditional learning of theories. This is predominantly because theoretical work was not viewed by

participants or respondents as adequately preparing SCLs for SCW. This mirrors exactly what Narey (2014) outlines in his report on social work education that *“universities have been allowed to provide too much theory, too much sociology and not enough about spotting things in a family which are wrong”* (p. 30). This could also relate to the observations of Lub’s (2019) and Payne and Campling (1990) which report despite sufficient theories in existence *“Many people have difficulty in applying social work theory in practice”* (p. 39). LIT (2014) graduate satisfaction study found over 40% of those respondents were confident applying theory to practice. McSweeney’s (2017) research demonstrates SCWs in Ireland are indifferent and resistant to theoretical education due to its overly academic nature. McSweeney and Williams (2019) found SCW’s may disproportionately value one theory over another while others were fearful of theory being applied too narrowly and, therefore, dangerously. However, it is likely SCWs are unconsciously applying theory to their practice which correlates with Hick’s (2016) and Trevithick’s (2017) view that the difficulty quite possibly relates to what counts as theory, since there are many conceptualisations of theory. For example, psychodynamic theory, whilst not necessarily named in PDG, is operational throughout the work the PDG members are engaged in and this is then transferred to their practice. This is observable in the findings, particularly Theme 3 in which participants explain how their PD learning has transferred to their practice. Many of the attributes PEs seek in a SCL (see appendix O) have their roots in psychodynamic and humanistic theories. These attributes included having an awareness of their own experiences, knowing their triggers, (assists with awareness of transference and countertransference), maintaining boundaries and engagement with RP and supervision.

Much of SCW in this current study was deemed to rely more on RP (which interestingly, did not seem to fall under theory) than theoretical learning, particularly in the highly demanding areas of SCW. This corresponds with the views of Staempfli et al., (2012) when they explain that experienced practitioners’ difficulty in naming knowledge is due to its being subconscious, as successful practice in pressurised situations requires fast thinking. One organisation that requires fast thinking and mainly seeks male SCWs due to the volatile and high pressure of the work would employ those with PD learning regardless of gender. Succinctly phrased, choosing a SCL or SCW depends on that person knowing where they cognitively and emotionally reside with issues experienced by individuals worked with. Additionally, the SCL/SCW

must be aware and know how each of those issues will affect them, with the necessity and ability to see it from the other persons perspective. Other reasons for choosing PD learning over theory revolves around wondering if solely theory trained, will the SCL/SCW be capable of transferring that theory to every individual worked with? This is similar to Fook's (2002) view when she stated practice should not solely be derived from theory but from intricate social and historical interpretations that lead to "*the moment of practice*" (p.38). van Bommel et al., (2015) found Dutch social work managers hiring decisions relied upon applicants personal attributes pertaining to skills and attitudes about the work appeared more decisive than learned knowledge/theoretical skills. Employers assume that personal attributes are difficult to alter, while knowledge can be learned more easily. This is something PEs in this current research frequently alluded to. Whilst both PEs and van Bommel et al., (2015) consider excellent theoretical knowledge highly valuable, it was associated with fewer personable abilities in working relationally with individuals and also reduced a lasting interest in daily work with individuals. This was also reported by both SCW and PE participants. These participants frequently mentioned how their co-workers without PD learning struggled to form working relationships or were slower to form working relationships than their PD trained counterparts. Also, a reduced lasting interest in daily work with individuals was noticed often referred to as burnout. Furthermore, there was an inability to take the appropriate responsibility for their work. This was often viewed as taking on too much or too little responsibility for what had occurred.

It was thought by PEs in this current study that theory could be learned anywhere and anytime but PD was a process that takes time to become embedded and built upon. As Berger (1996) affirms traditional teaching methods such as lectures, videos, and class discussions, as suggested by Urdang (2010), culminate in teaching "*about*" group work. These traditional methods diminish the explicit experiential learning arising from participating in a group. Relationship is deemed a key element to the success of SCW practise. This correlates to the Perry and Szalavitz (2006) view that therapeutic experiences occur within naturally occurring healthy relationships. PDG membership sets the scene for naturally occurring healthy relationships to develop which lends itself to therapeutic experiences without taking place in therapy. This alleviates any concerns that therapy is occurring under the guise of PDGs. Kivlighan III et al., (2019) claim relationship quality refers to group members sense of belonging and acceptance, as well as the depth of the interpersonal work. This is observable

from the findings of this research when participants spoke about their experiences of facilitation and with other group members. PD was where group members experienced a sense of belonging and acceptance which in turn led to other learning moments due to the level of trust that was experienced when that sense of belonging and acceptance was felt. Feelings of belonging and acceptance also correspond to the work of Heydt and Sherman (2005) who understand that self is the main way or means that a practitioner has to facilitate change, a sentiment I think also fits for PD facilitators. This is particularly true when some participants credited facilitators with some of their aha moments or moments of insight. This correlates with the work of a number of authors; for instance, Solomon and Siegel (2003, p. 3) explains how “*relationships can nurture and heal the mind*” with Howe (2005) explaining how even one relationship is capable of counteracting trauma. The understanding that relationships are capable of healing the mind is moving away from the idea that healing the mind can only occur in therapy. I am unsure if PD facilitators realise not only the position of power they hold but also hold the power to facilitate positive change for learners through PDG. To facilitate these positive changes relies on facilitators engaging in RP similar to the participants and respondents of this study. Those that experienced negative facilitation experiences did not believe they had gained PD learning during that semester.

9.4 Theme 3: Elements of PD Learning Transferred to Practice

Introduction

This section of the discussion is concerned with elements of PD education transferred to practise/practice and will include two visual models, derived from the three findings chapters. Figure 2 depicts the contribution PD makes to both SCW and supervision and Figure 3 depicts the commonalities between SCW and PD. The research question “Is the PD module from LIT SCW HE programme relevant and beneficial for SCLs, SCWs and their PEP supervisors?” is addressed in this section. Additionally, the following sub-questions are also addressed in this section:

- How are PD, SCW and PEP defined, conceptualised and operationalised?
- How do participants and respondents articulate the content of their learning and their experience of PD as a pedagogical and practice process?
- What role, relevance and benefit, if any, does PD have in SCW education, PEP and SCW practice?

Many participants were unsure while attending PD, in the first two years of their SCL, if PD would have any relevance or benefit to their practice. Elements of PD transferred to practice, as one might expect, was more commonly noticeable once participants and respondents were engaged in (usually their 2nd) PEP and practice. Participants and respondents often included their personal and professional learning as intertwined. Some of the elements of PD transferred to SCW practice discussed in this section (others are depicted in the following model) include:

- Triggers
- Assertiveness
- Self-care
- Self-awareness
- Reflection/ reflexivity
- Supervision.

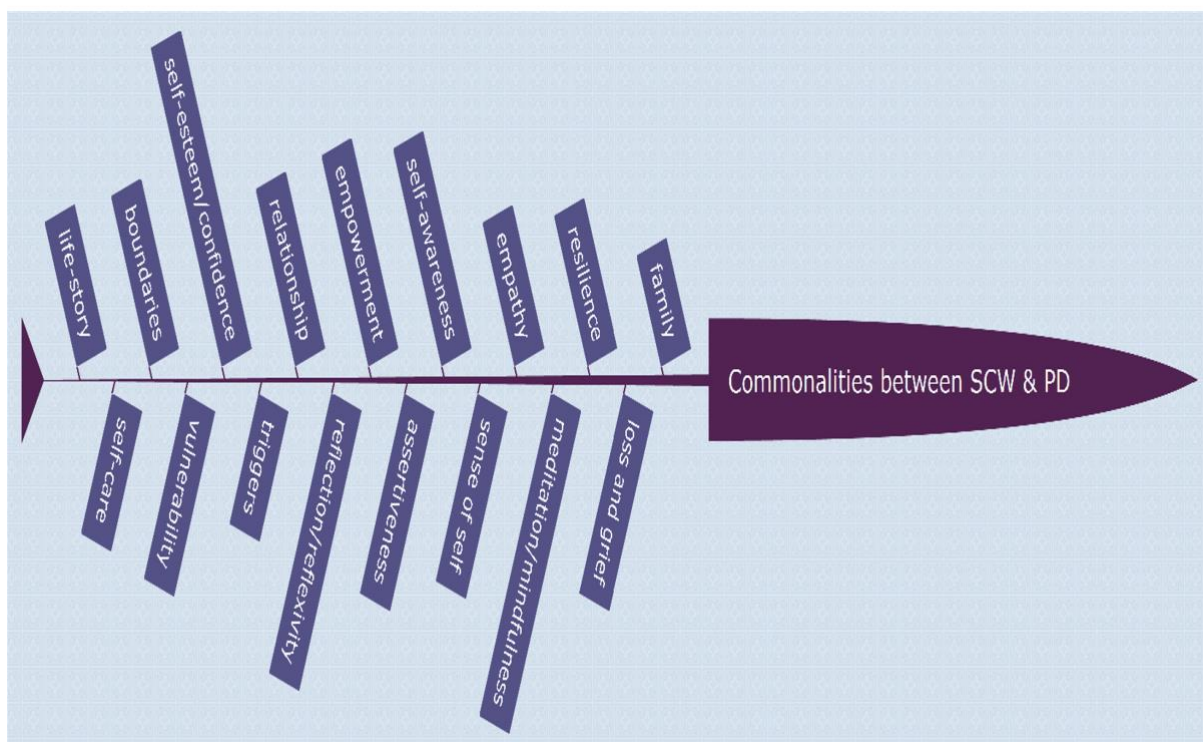


Figure 3

All participants and respondents specifically articulated that, following qualification, PD remains with them personally and professionally. PD equips participants and respondents to know how individuals worked with may be experiencing interventions. Experiencing interventions is similar to how they themselves experienced PD and also to know which approach to the situation might work best when issues arise. PD was experienced as personally beneficial to help manage stress and in turn transferred to practice to assist with self-care. It seems the participants and respondents' real life situations, discussed in PDG and experienced outside PDG, were the catalyst for transferring PD learning to their practice. Participants and respondents also carried strategies from PD learning such as RP which led to implementing those strategies in their practice. Strategies which broadly relate to managing relationships with staff and individuals worked with were activated, supervision and coping with and managing stress through self-care strategies. Examples were provided by participants and respondents of working and meeting with individuals where they are at as opposed to where staff or management want them to be. PD was also thought to be transformational since it focussed on all aspects of the participants' and respondents'

lives. This aligns well with Tomlinson-Clark and Clark's (2016) definition of transformational learning; learning that induces far reaching change in the learner, different to other types of learning experiences, which shape the learner and produce a significant impact, or paradigm shift, which then affects the learners' subsequent experiences. Tomlinson-Clark and Clark's (2016) views may explain why participants and respondents continue to find PD learning applicable personally and professionally. As Fook (2015) and Gardner, (2014) agree, introspective and transformative attitudes and processes of uncovering, examining, and altering central assumptions is a common thread between reflection, critical reflection, reflective practice, reflexivity, and praxis. RP will be discussed later in this chapter.

The participants and respondents outline numerous ways PD has had a transformative effect on them during the time they were engaged with PD pedagogically and began to trust in the process through incrementally opening up to their PDG members. This most likely led to transformative learning which occurs when learning results from transforming problematic "*frames of reference*", with a view to making them more "*inclusive, discriminating, reflective, open and emotionally able to change*" (Cranton, 2016, p. 27). Transformative learning theory promotes that learning necessitates a change in consciousness, referred to as a "*perspective transformation*", which involves the resolution of a "*disorientating dilemma*" (Mezirow, 1991, p. 185). Thus far in this section, the overarching research question has been kept to the fore and it would seem that participants and respondents believed and demonstrated thus far that the PD module is relevant and beneficial for SCLs, SCWs and their PEP supervisors. The remainder of this section continues answering the overarching research question and also the sub-question "How do participants and respondents articulate the content of their learning and their experience of PD as a pedagogical and practice process?" Additionally, this part of the sub-question "What role, relevance and benefit, if any, does PD have in SCW practice?" continues to be addressed. As Taylor and Cranton (2012) confirm, "*it is not what they do or say but, how it is done and said that gives an indicator of transformative learning*"(p. 523). To evaluate transformative learning, they agree that self-reporting in the form of journals, diaries, and other written sources are adequate, as is self-evaluation and interviews. Evaluating transformative learning mirrors the research approaches and the findings for this thesis.

The findings show PD learning is transferred to practice by providing the tools to participants and respondents to connect relationally and creatively to individuals they work with, collegially and in practice. Prior to PD, relational issues were considered a weakness whereas now support or supervision is sought to work through any issues arising. Work undertaken on beliefs and values during PD also transferred to SCW practice. Thinking quickly and creatively are attributed to PD learning, characteristics necessary due to the ever changing dynamics of situations within practice. It can be discerned that participants and respondents took the tenets of PBL from their PD experiences and continue to resolve problems and strategise in the same manner with which they incorporated PD learning into their practice. Recognising instances of transference and countertransference in personal and professional life was also attributed to PD learning. Zosky (2013) was fearful that transference and countertransference would be a possibility for those carrying unresolved trauma. PD learning provided participants and respondents the tools to identify when they were struggling personally and with their practice.

An unexpected finding was when three Irish participants, Majella, Guinevere and Rich found PD had an unanticipated benefit of generating more understanding and acceptance of non-Irish/asylum seeker learners and by default other cultures which has also transferred to their practice. This is affirmed by Bieschke et al., (2003) and Conyne (1998) who found learners who participated in multicultural groups increased their cultural awareness. Furthermore, Rowell and Benshoff (2008) assert that learners who participated in personal growth groups in a multicultural counselling course experienced significant increase in ethnic identity development. SCWs are expected to work with individuals regardless of gender, age, ethnicity or faith. For that reason, it is important that all future SCWs are exposed to various ages, genders, faiths and ethnicities as part of their training. PD provides a natural setting to provide that exposure in an experiential manner. This next sub-section focuses on how identifying triggers from PD were understood and how that learning was carried in to their practice. This next sub-section also addresses the overarching research question and encapsulates the three sub-questions.

Triggers

Participants and respondents directly mentioned how learning and understanding triggers from PD transferred to their practice. Also considered necessary was the ability to listen to themselves which in turn helped them recognise and understand triggers, particularly their own triggers. A defining characteristic of PBL is a focus on learners' learning rather than on teachers' teaching (Barrett, 2017, p. 7). Therefore, it could be suggested that PD facilitators are facilitating learning but not in fact teaching. This was mentioned by the participants too and is evident throughout PD learning with so many elements of PD relying on the SCLs learning from situations and experiences only they have knowledge of. This learning had the wider implication of knowing one's self before commencing work with individuals. This according to the participants is particularly true in difficult and high stress situations, whereby, you do not react or allow yourself to be in a situation where it is possible to be triggered. At the very least SCW's should be aware when a situation is most likely to cause them to be triggered. Participants and respondents named some of their own triggers. Recognising triggers led participants and respondents to be more vigilant, particularly in practice moments, of themselves and of their corresponding triggers. This vigilance is crucial for the wellbeing and safety of the individuals who engage with services and is also dependent on SCWs honesty around how they are impacted by the work and, indeed, how they then affect the individuals they work with (Poole and Greaves, 2012). Tarshis and Baird (2018) and Orlinsky et al., (2011) also note, reactions and how individuals are triggered is individual but must be attended to prior to engaging with vulnerable individuals. This necessity is further highlighted when participants from this current study noted that if 66% of the population have experienced ACEs then logically 66% must also include SCW's. Thus making it vital that SCLs/SCWs can, or at least know how to, identify their triggers before entering SCW practice. Engaging with PD opens people up in a way that they can recognise their triggers and also to know when they are impacted during their practice. Recognising triggers related to grief and loss experienced across the life span was also prevalent among the participants and respondents and was transferred from PD learning to practice.

According to participants and respondents, learning from PD enabled them to identify those triggers which has had powerful affects and effects on them personally and in their practice. Newcomb et al., (2015) highlighted Jung's theory that, in order to heal,

we must understand our own pain to assist us in transforming our flawed pasts into strengths. Moreover, we must provide our strengths as a source of healing to those who are unable to cope effectively with adverse feelings. This is something Jung managed to achieve which subsequently assisted him in his own work. Participants and respondents acknowledged similar experiences from their PD learning that has transferred to their practice.

Additionally, failing to recognise triggers or when triggered can lead to boundaries been crossed. More importantly, not solely knowing how triggers can be activated but knowing what they are before being triggered is deemed beneficial for practice. Self-reflection, self-awareness and RP from PD learning were considered essential to work through triggering events. Positives taken from triggering and or potential triggering experiences, for participants and respondents, included the possibility of the triggering experience being useful to the individual responsible for the triggering. PD, according to participants and respondents, seemed to be the place to discover that you are not alone in having issues and that having issues is wholly acceptable. Learners, according to Brookfield (2007) can develop critical thinking as a result of triggering experiences which correlates with the idea that deep emotion activates double-loop learning. Hill and Updegraff (2012) suggest that practices such as mindfulness techniques and meditation improve emotional awareness, vital for healthy emotional regulation (Siegel, 2007) and recognising potential triggering situations before and during work with individuals.

With the overarching research question to the fore, this section has addressed where PD has transferred to practice. Additionally, elements of sub-question two and three are addressed when participants and respondents noted how the content of their PD learning transfers to practice. Furthermore, the role of PD and its relevance and benefit to SCW practice was highlighted in this sub-section through discussing triggers in relation to SCW practice. The focus of this next sub-section is assertiveness and is discussed with the overarching research question and sub-questions two and three in mind.

Assertiveness

Many participants and respondents contend they were not naturally assertive before PD. Assertiveness gained from PD learning and its application to practice is described by participants and respondents in various manifestations. Assertiveness was observable when participants and respondents recognised assistance was required and thus requested. Assertiveness was beneficial in order to convey feelings, thoughts and ways of working to colleagues. Failure to be assertive will most likely have consequences leading to submission, exploitation, resentment, aggression, misunderstanding and negativity (Feltham and Dryden, 1993). This will lead to poor outcomes for the individuals worked with. For some, assertiveness was their biggest learning from PD that transferred to practice. With assertiveness came the ability for participants and respondents, to voice opinions, feelings and emotions, observations and requirements for support and supervision. Many participants and respondents came to realise lack of assertiveness was detrimental to their PD. Assertiveness is also deemed to play a role in maintaining boundaries. Once assertiveness was grasped, participants and respondents noticed their decision making capacities improved incrementally.

It would seem a number of authors understand the greater an individual's self-confidence equates to their level of assertiveness (Allen, 2007; Schwartz, 2006). Even though one may not wish to be assertive, participants and respondents were aware that it was imperative assertiveness was incorporated into their own practice. Assertiveness includes aspects such as good communication and active listening. These aspects were actioned when respondents noticed staff dissatisfaction. The respondents' assertiveness, derived from PD learning, prevented hostility arising when there was open and honest communication. Schwartz (2006) confirms assertive communication is necessary since it allows others to know our thoughts and our feelings. It also allows others to know how their negative behaviour affects others, providing an opportunity for them to change that negative behaviour. Not everyone realised they were learning about assertiveness during PD until they began implementing it in practice. Having engaged with PD learning, participants and respondents assertively voiced any concerns they had regarding the safety of their practice. They are, as authors such as Peneva and Mavrodiev (2013), O'Brien (2013), Van Servellen (2009) and Hargie (2011), suggest, protecting themselves without abusing anybody else in the process. Unlike LIT SCWs, Green's (2017) study amplifies areas where her participants lacked assertiveness; areas such as an inability

to voice their professional needs and requirements in order to practice professionally and safely. This completes the discussion element of assertiveness, the focus of the next subsection is self-care. This next sub-section speaks to the overarching research question and sub-questions two and three.

Self-care

Participants and respondents were cognisant of the importance of self-care and aware of the consequences of how inadequately caring for one's self in the SCW profession will ultimately lead to burnout. Burnout in SCW is extremely common and practitioners must, as a priority, engage in self-care strategies and actions. Understanding and recognising when not coping or getting burnt out was described by participants and respondents as invaluable learning from PD that transferred to their practice. Green's (2017) participants recommend the provision of more self-care in the education of SCWs. However, it is impossible to know, from that study, if those participants received training around self-care as part of their education. Since self-awareness is deemed crucial to understanding one's need for self-care, Green's (2017) participants describe their SCW training as lacking in both self-awareness and RP. Furthermore, those participants recount instances where self-awareness and RP are not part of nor expected in their practice.

Participants and respondents of this study were capable of identifying and recognising if feeling overwhelmed or challenged beyond what one can endure which led to them seeking support or supervision in order to self-care. Self-care is often only activated once burnout has manifested itself, as is observable with Greens' (2017) participants. Yet, participants and respondents in this study felt somewhat insulated from burnout when RP and self-awareness was adequately integrated in to their practice and ultimately culminated in self-care. This integration of RP and self-awareness allowed participants and respondents to notice the cumulative nature of stress. The participants and respondents then incorporated their PD learning of RP and self-awareness training as a protective factor to guard against burnout. Other elements of PD learning related to burnout and transferred to practice include assertiveness to seek support and supervision. Support and supervision act as barriers to subsuming the felt stress. Rogers (1961) states "*a fully functioning person ... has this underlying confidence in themselves as trustworthy instruments for encountering life*" (p. 195). The participants and respondents demonstrate that they have obtained this underlying

confidence in themselves by the way they practice SCW and take responsibility for their own self-care and by default their own wellbeing. Stress and burnout are generally experienced by workers providing direct, one to one, services to individuals, especially those in mental health and health care professions. Additionally, organisational factors, issues such as overwhelming caseloads, long hours/shifts, and insufficient resources also play a role in burnout (Stoesen, 2008). Johnson and Acabchuk (2018) confirm self-care is thus critical for one's efficacy and the achievement of both professional and personal obligations. That sense of self-efficacy or achievement is something that appears lacking in Green's (2017) participants. Participants and respondents believe without PD learning around self-care they would have burnt out in the profession at a very early stage in their careers. Self-care can be vital in moderating *"burnout, workplace stress, vicarious or secondary trauma, and other deleterious employment circumstances"* (Miller et al., 2020, p. 55).

Transferring PD to practice is viewed as majorly beneficial in light of the individuals worked with in practice, many having endured horrendous experiences. Contemplative pedagogies and practices such as grounding, mindfulness and meditation were also viewed as strategies to self-care and were transferred from PD to practice. The proverb "the shoemaker has no shoes" by Burton (1621, cited in Skovholt and Trotter-Mathison, 2011, p. 5) is apt, as it describes how easily self-care may be neglected when, not only caring for others, but within the business of life. Compassion fatigue, synonymous with burnout, can result in underutilising self-care strategies (Van Heugten, 2011). PD was acknowledged by participants and respondents for the learning gained around mindfulness/meditation and the ability to notice when depleted. Noticing when depleted perpetuated meditation and mindfulness being incorporated into their self-care routine. Being aware of the self through meditation and the need for self-care was also attributed to PD learning. This mirrors the second of Rogers five attributes compatible with becoming a "fully functioning" person, namely "existential living". Existential living concerns living in the now, being present and unafraid of each lived moment and what it might bring. Contemplative pedagogies from PD, such as meditation and mindfulness exercises, bring PD learners in to that present moment space. Furthermore, self-care elements from PD learning was considered, by participants and respondents, to be an even more necessary practice when encountering triggers as part of SCW practise. Without the knowledge to self-care, participants and respondents believe, they would be

unable to adequately assist the individuals encountered in practice. This level of self-care was also observable when participants' and respondents' work involved working with severely traumatised individuals. Stella (2016) explains how self-awareness practices, such as mindfulness, could potentially enhance learners' ability to attune to their own internal processes, distress, triggers, and fears. What is discernible from Green's (2017) and Miller et al., (2020) studies is that participants employ only moderate measures of self-care which could possibly correlate to whether self-care is included on curricula.

Self-care was observed as a by-product of self-awareness and assertiveness which led to setting boundaries around work schedules and taking time-out for self-care. RP learning from PD was implemented in the participants' and respondents' practice. This included recognising when they were overextended at work. This over extension prompted personal self-care to be activated. Recognising the need to take time off resulted in self-care being focussed on rest and a refocussing of priorities. The relationship with self is crucial to the level of self-awareness required to know when self-care is required. Self-care has a direct effect on self-awareness (Hamilton and Jackson, 1998). Self-awareness is the focus of this next sub-section and speaks to the overarching research question and elements of all three sub-questions.

Self-awareness

All participants and respondents demonstrated how they developed further self-awareness from PD and more importantly how that self-awareness transfers to their practice. Learning about the self, or becoming aware of aspects of the self, is referred to as self-awareness and self-development (Holston and Taylor, 2016). Earlier topics covered have already attested to the participants' and respondents' developing self-awareness. This section will discuss the transfer of self-awareness from PD to SCW practice. Memories of having articulated, for the first time during PD, a feeling or self-observation was carried in to subsequent practice. Participants and respondents demonstrated how self-awareness and self-assessment of feelings from PD has transferred to their practice. Bishop (2013), Moss (2012) and Hargie and Dickinson (2011) speak to this when they note self-awareness involves getting to know, like and be in charge of the authentic self. Similarly, Richards et al., (2010) define self-awareness as a state of accurate recognition, knowledge or mastery of one's often unspoken feelings, thoughts, motivations and behaviours. Kay (2018) explains the

benefits of being self-aware include awareness of our strengths, vulnerabilities, and any unresolved issues.

Self-awareness from PD learning that transferred to practice included being sufficiently aware to know when something does not feel right. Thought processes were continually going through the mind whilst interacting with individuals worked with. These thought processes ensured self-awareness was occurring at all times during the SCWs interactions. Stella (2016) reiterates how self-awareness practices, such as mindfulness, could potentially enhance learners' ability to attune to their own internal processes, distress, triggers, and fears. These self-awareness practices nurtured adeptness at recognising and facilitating individuals worked with through a process similar to what the learners have experienced during their engagement with PD. Stella's (2016) views, with an added layer of PBL, are similar to what Jung describes as a prerequisite to healing. This prerequisite to healing includes understanding our own pain to assist us in transforming our flawed pasts into strengths. It was further claimed by participants and respondents, that without PD learning, the impossibility of becoming the competent professionals they regard themselves to be now. Giluk (2009) concluded that individuals high in mindfulness may have increased tolerance for an extended array of thoughts, emotions, and experiences. This increased tolerance for an extended array of thoughts, emotions, and experiences most likely extends to the individuals encountered in practice.

O'Connor and Murphy (2006, p. 213) acknowledge the importance placed on PD is learning about one's "*Self*" in order to become more self-aware. This self-awareness is necessary to examine certain personality traits. The participants' and respondents' self-awareness led to forward thinking around what could be deficient in their experiences of work if they persisted in consistently striving for perfection. Also, awareness around language used to communicate was noted as well as remembering to relax in the presence of individuals worked with. This compares favourably with the work of Koprowska (2010) who discusses the process of learning new communication skills, and how it requires self-awareness at a greater level than usual. Effective communication, particularly intrapersonal communication, relies on our knowledge of self and the awareness of how our communication is likely to impact on others. The more in tune we are with the self and understand the self, the more capable we are of

adapting our own behaviours to bring about change to the effect/affect that we have on others had we proceeded without that self-knowledge.

The above has much in common with Richards et al., (2010) and Duval and Wicklund (1972, p. 2) understanding of self-awareness, recognising it includes

focusing on the self, enabling self-evaluation. When self-focused, comparisons of the self are made against standards of correctness that specify how the self ought to think, feel and behave.

Opportunities from PD to recognise and name feelings and emotions has transferred to practice too. This awareness from PD facilitates not reacting immediately or negatively to someone's negative behaviours but wondering if perhaps there is something bigger occurring for that person. This wondering has its roots in psychodynamic and humanistic theories (Winnicott, 1960, 1965, 1985; Dockar-Drysdale, 1965, 1990, 1993; Bowlby, 1965, 1980 and Bion, 1961; Rogers, 1961).

Self-awareness from PD has transferred to practice through leading participants and respondents to be honest with themselves around their feelings. For participants and respondents, self-awareness from PD has transferred to their practice by not only being aware of themselves but also aware of those they interact with. This has much in common with Holroyd's (2015) views on self-awareness. Self-awareness is seen as having a deep understanding of someone's emotions, along with their strengths and limits, values and beliefs. This also involves being able to understand the effect their behaviour has on others. Self-awareness is required to know when one's own limits are reached and when to say "No" in order to preserve one's own mental health and hygiene. Participants from Green's (2017) study report having little input from their SCW educational programmes on the concepts of self-awareness. Whereas in this study, participants and respondents provided many examples of how their self-awareness developed in PD and transferred to practice. Awareness of others' needs was important but not to the detriment of keeping an awareness of one's own needs to the fore. Self-awareness has afforded participants and respondents the ability to trust that others are also capable of carrying out the work, even if their approach is different to their own. It was a consistent view that SCW's who are not self-aware pose a danger to other staff and individuals worked with.

Self-awareness from PD transferred to practice in the guise of knowing when to take a break or step away from the work for as long as necessary until one is ready to proceed. For some, self-awareness was one of their biggest learning from PD that transferred to practice. PD is credited with giving some participants and respondents the impetus to question why they think the way they do and to break down thought processes. Possessing a high level of self-awareness led to being attuned and understanding when behaviours changed in a group. This understanding included the knowledge that it was not personal but the individual/individuals way of communicating where they were at personally. Furthermore, this level of understanding allowed the work to continue unimpeded and facilitated a check in with the group member/or members. To look and listen deeper to discover what is not been verbally communicated requires self-awareness. Thompson (2015) confirms that attunement to the feelings of others necessitates the need to be in touch with our own feelings, and an awareness of how we are emotionally impacted by situations. The level of self-awareness from PD that transferred to practice acknowledged deficits in self-awareness before PD and observed the positive impact that PD learning has had on the individuals worked with.

Learning from PD was affirmed with the realisation that it is only possible to change oneself and not others. Moreover, this learning extended to recognising when unexpected situations arose to resolve them as soon as possible. Expedited resolution of unexpected situations avoided intensification and toxicity developing. Additionally, resolving unexpected situations expeditiously avoided participants and respondents bringing this event home and it becoming muddled in the mind over time. Practising in this way mirrors in some respects the views of Thompson (2015), Dunne (2002), and Burnard (1992). They recognise self-awareness as perception of our customary responses to situations so that we can further develop positive responses and qualities. In addition to positive responses and qualities, we must be alert to our negative responses or reactions that could impede effective practice. Participants and respondents rely heavily on self-awareness from PD learning in a number of areas of their practice. Yet, Greens' (2017) findings imply the role of self-awareness in SCW practice appears to be an ideological concept, with her participants believing self-awareness to be an essential professional skill that is not adequately provided in SCW education. Increased self-awareness corresponds with one's ability to reach self-actualisation (see Maslow, 1943, 1954 and Rogers, 1951) and self-awareness is

considered the first stage in developing emotional intelligence (Goleman, 1995). Greens' (2017) participants appear to know self-awareness is required for practice and seem to be attempting to source self-awareness learning within their organisations and perhaps never fully attaining self-actualisation. They, however, do seem to possess what Monat (2017) and Jabr (2012) refer to as a self-awareness that resembles consciousness and having an understanding of their own existence. To be self-aware is to be conscious with the realisations that we are thinking beings, capable of thinking about our thoughts in a mindful manner. Participants and respondents have demonstrated that self-awareness for practice resides in a completely evolved and different stratosphere to the views of Monat (2017) and Jabr (2012). In complete agreement with Saunders et al., (2007) and Stella (2016), unless learners discover how to recognise and attune to their own avoidance patterns, these behaviours will manifest in their professional lives, hindering their ability to establish an effective therapeutic relationship. Sutton et al., (2015) convey enhanced work competency, communication, self-confidence, and wellbeing are related to self-awareness. Hughes and Youngson (2009) definition of PD is apt here when they define PD "as the development of self-awareness and the effect of the person's history and training on their professional development" (p. 183). It would seem personal growth as per Irving and Williams (1999, p. 517) definition is stifled for Greens' (2017) participants and those with similar experiences. This mostly occurs due to the missed opportunity to secure PD from their educational experiences. It is as perhaps Berger (1996) suggests, traditional teaching methods such as lectures, videos, and class discussions, as suggested by Urdang (2010), culminate in teaching "about" group work, as opposed to the explicit experiential learning arising from participating in a group. Without that educational foundation of PDG experiences, SCWs lack the raw materials of PD, in particular, self-awareness learning which can be built upon throughout their practice. PDGs are broadly known for developing self-awareness for trainee practitioners (Lennie, 2007). As Ohrt et al., (2014) conclude, PDG members gained insight into their own personal self-awareness and their strengths and limits. In this current study, participants and respondents rely on their self-awareness to know when supervision is required, yet, Greens' (2017) participants rely on supervision, which is often infrequent, to develop their self-awareness which is related to the professional use of self. Without self-awareness, professional use of self in the work may be lacking, and at worst, dangerous for the SCW and the individuals worked with.

Cooper (2012) outlines the ease with which SCWs can cross the boundaries at work without recognising this breach. This is particularly true if the work brings up memories or feelings not already dealt with. Memories or feelings not already dealt with are also referred to as triggers. As Tarshis and Baird (2018) and Orlinsky et al., (2011) agree, reactions and how individuals are triggered is individual but must be attended to prior to engaging with vulnerable individuals. Furthermore, triggers are usually unanticipated, particularly if the triggered individual lacks some degree of self-awareness. Self-awareness is key, according to Beddoe et al., (2011), Langer, (1989), Ownsworth et al.,(2000), Urdang (2010) and Lyons (2013, p. 108), for SCW and their professional use of self. They further note that it is vital SCW's know and understand their own "*personality, attitudes, values and beliefs*". Possessing that knowledge avoids any undue influence on their practice. Moreover, as a result of PD learning there existed an ability to absorb criticism as constructive with the self-awareness to reflect on the criticism. This in turn led to a more open and accepting practise. This self-awareness can lead to more proactivity in our lives, and enhance our self-acceptance, whilst also inspiring the achievement of positive PD (Sutton, 2016). Controversially, Conley et al., (2013, p. 296) claim "*psychoeducational*" or "*didactically oriented programs*" are rarely effective in changing behaviours of adolescents or preventing problems, indicating that the same is true for higher education learners. However, every participant and respondent in this study has explained positive shifts in their behaviours as a result of having engaged in PD learning which has subsequently transferred to their practice. This confirms the view of Schoenholz-Read (2000) that when learners report the "broadening" or "stretching" of their perspective, they feel emotionally affected by their learning. Knott and Scragg (2016) note how an increase in self-awareness leads our behaviours to become more regulated, leading to more effective professional and personal interactions. Practicing self-awareness culminates in those individuals being more emotionally invested in meeting the standards required of them (Duval and Silvia, 2001 and Sheppard, 2007). CORU is seeking SCLs to meet the SoP, perhaps a sharpened focus on attaining improved self-awareness and PD may naturally lead to organically meeting many of those SoP. Since only one HEI in Ireland provides PD learning as a standalone module, I would suspect that Greens' (2017) participants are not in a minority regarding lack of access to PD learning and opportunities to gain self-awareness and assertiveness. All participants and respondents demonstrated their spontaneous implementation of self-awareness and RP in their practice. Reflective practice is the focus of this next sub-

section and speaks to the overarching research question and elements of all three sub-question.

Reflective practice

Another element of PD transferred to practice is the participants' and respondents' propensity to engage with RP, a practice that develops over time and with self-discipline. RP was deemed a skill gained by participants and respondents and predominately learned through PDGs. This RP was deemed a skill in slowing oneself down and taking time to reflect on what one is actually doing. Additionally, RP, learned in PD, recognised the potential impact that slowing oneself down and taking time to reflect had on the individuals worked with. RP from PD questioned one's own position on improving practice and providing an improved service and connecting better with colleagues. Moreover, RP from PD examined what more could be implemented to improve outcomes for individuals. This is contradictory to the views of Johns (1995) and Saylor (1990) who suggest that without structure and supervision, reflection may not progress beyond being cathartic. Whilst participants and respondents were not asked what model of RP they incorporate in to their practice, they demonstrate their engagement with RP and the subsequent outcomes from their RP.

Just like self-awareness is a precondition to increased PD or personal growth, RP can be viewed as a derivative of self-awareness. Karm (2010) also reminds us that the "*ability to reflect is a precondition for professional growth*" (p. 203). This professional growth includes comparing the way individuals are treated with the way they themselves would like to be treated. For participants and respondents, this included taking time to reflect on how they were feeling and what was going on for them at various stages of their day. Some participants articulated that PD had a hierarchy, firstly it was for them as individuals, then their families and finally, for practice. PD learning transferred to practice by assisting participants and respondents to find their voice and confidence to speak up and out if they experienced any issues. More importantly, participants and respondents acknowledged how they were constantly aware of how they were before, during and after encounters with individuals worked with. This awareness compares favourably with the views of Hammick et al., (2009) and Healey (2008) who see the value in reflectively examining the working day to discover how emotionally or otherwise one was affected and how new approaches to practise could be developed. Reflectively examining during the day resulted in

participants and respondents being empowered to know when to step away from a piece of work which they described as having occurred as a result of their RP. However, Farrington (1993) suggests that, with hindsight, people commonly exaggerate what could have been anticipated. There is no evidence from this research to corroborate Farrington's view. Land and Gorden (2013) state RP is "*the desire to explore, to innovate, to seek new insights, unearth new truths, pass on these findings, promote reflection and evaluation, form and transform thinking*" (p. 16). Participants and respondents voiced their concerns for the safety of their practise had they not engaged with PD learning. Contrary to the views of participants and respondents who verbalised the insights RP provided them with, Jarvis et, al., (1993) and Mackintosh (1998) are hesitant to agree that reflection provides all it suggests it does, due to insufficient research evidencing the benefits of RP. Currently, this seems unlikely having charted the participants' and respondents' views on RP during this study. Moreover, PEs from this study were adamant that LIT SCLs/SCWs possess self-awareness and engage with RP as an integral part of their practice. The aforementioned authors views have much in common with Banks (2006) who views defensive practitioners as those that carry out their duties to meet the obligations to the agency, rather than taking the "*right action; personal and agency values tend to be separated, and the latter adopted*" (p. 140). For the most part, agency obligations match the "*right action*". However, without RP, it is unlikely agency obligations that do not serve the individuals needs will be noticed or discussed. This resembles Glumbikova's (2020) technician professional whose main priority is meeting the agency's obligations even if these obligations are not in the best interests of the individual or even best practice. An inquisitive response to what may be occurring rather than a reactionary response was recognised as an element of PD learning transferred to practice. RP is mostly considered an individual occurrence and this is understandable, given that autonomy is considered essential within SCW practice. This autonomy requires individual discretion and judgement in multidimensional and uncertain settings and encounters (Hoyle, 1980; Freidson, 1984, 1991; Hoyle and John, 1995). The finding around RP assuages the views of Boud et al., (1993), Hunt (1998) and Johnston (1995) who advise the impossibility of predicting what or why any individual will learn or indeed if they learn at all. It also affirmatively answers Meierdirk (2012) question; if educators and social constraints are restricting learners by imposing their parameters for reflection on learners? This does not seem the case with LIT SCLs RP experiences but may perhaps be the case for those learners who learn

about RP in a manner dissimilar to PD learning. Additionally, this divide between intellectualising RP or providing RP experientially may correspond with the participants in this study who recognised the differences in practice between those with and without PD learning. RP was key for participants to recognise when support and supervision were required. Supervision is the focus of this next sub-section and speaks to the overarching research question and elements of all three sub-question.

Supervision

Whilst this sub-section of the discussion revolves around PD learning transferred to practice, it is inevitable, as mentioned earlier, not to have crossover between PD, SCW learning and practice. This crossover occurs under this topic. Participants and respondents seemed to rely on PD for a number of elements, sourced from supervision through engagement with RP, for the following; direction in the work, managing self in their work, alternative perspectives and for wellbeing. This corresponds somewhat with the views of Hess (1980) that supervision is a *“quintessential interpersonal interaction with the general idea that one person, the supervisor, meets with another, the supervisee, in an effort to make the latter more effective in helping people”* (p. 25). And whilst Hess does not specifically mention managing self in their work and their wellbeing it seems to be implied. A thread running through this research is that in order to work with vulnerable individuals we must have, or at least be working towards, resolving issues and recognising triggers. Similar to the participants and respondents, Feltham (2000), Westergaard (2013) and Page et al., (2015) go some way towards addressing the supervisee’s needs when they note supervision should also provide a sanctuary for staff, where guidance and clarity can be sought and secured on matters, such as self-assessment, assessment of needs, desires and ambitions.

In the absence of supervision, there seemed to be a reliance on PD learning to prevent burnout. A number of participants and respondents rely on the relationships formed in PD for outside support for their practice without breaching confidentiality. Davies and Collings (2008) emphasise the importance of supervision and RP to prevent burnout. Attributed to PD learning was knowing when supervision was warranted and how to request it. Green’s (2017) participants do not seem to have fully mastered the ability of knowing when supervision is warranted or how to request it. This matches the view of Joyce et al., (2011) that a growing number of learners concede they lack the

knowledge and ability “*to initiate or sustain a relationship with their field supervisor* (p. 251). Participants in this study share similar experiences to Joyce et al., (2011). Moreover, Joyce et al., (2011) believe curriculums often leave learners unprepared for supervision. An unexpected finding emerged when participants and respondents demonstrated how PD learning prepared them for supervision, the process and the necessity of supervision. Supervision was sought by participants and respondents following an intense piece of work and when clarity was sought on viewpoints and relationships. The reasons supervision was sought by participants and respondents match the views of Feltham (2000), Westergaard (2013) and Page et al., (2015) mentioned in the previous paragraph. In addition to knowing when supervision should be requested, PD learning affirmed how to articulate and express feelings in supervision. Experiences of opening up and sharing with PDG members transferred to participants’ and respondents’ supervision experiences. Engagement with PD was considered to have led to a better supervisory experience not only for the supervisor but the supervisee also. Learning to be open and honest in supervision was attributed to PD learning and consequently, supervision provided reassurance which boosted self-confidence around practice. Much of the aforementioned resonates with the views of Ward (1999) who confirms what learners attain from their “*professional training*” may be most likely obtained from the process of the learning “*process*”, including the “*context*” just as much if not more than the content (p. 162). Ward (1999) also agrees that the strength of this training relies on learners reflecting on their experiences, consciously and unconsciously, particularly their experiences of the following:

- The way in which they are treated (both professionally and personally) by the teaching and other staff;
- Their observations of the congruence between staffs espoused views and their actual behaviours (p. 162)

This unconscious reflection process exists when, for instance SCWs/SCLs, happen to refashion in one context such as supervision the dynamics of another context such as PD (Ward, 1999). Participants and respondents believed that without PD learning, engagement with supervision would be on a superficial level. Clarity was provided when opposing viewpoints was brought and discussed in supervision. This is in part due to participants and respondents understanding the supervision process similar to McCann’s (2000) views. Supervision, according to McCann (2000), should be experienced

as a reflective learning process, rather than a process for direction and audit, represents a significant difference between teaching techniques as opposed to teaching a way of thinking which may also augment remembering”(p. 43).

Furthermore, participants believed that the assertiveness to seek supervision and support was thought to be lacking in those without PD training. Similarities between PD and supervision were observed by the participants and they noted that the adjustment to supervision was easier for those with PD learning. A by-product of self-awareness was recognising when supervision was required. Both those who sought and provided supervision claimed to have learned the necessary skills from PD. Skills such as collaboration, professionalism, discussion, gaining consensus and that various perspectives are applicable to any issues that arose. The contribution of PD to SCW learning can, at times, be also viewed as subtle. This subtlety is observed when often participants and respondents had not always realised they were implementing PD in their practice. However, on reflection they realised they were incorporating PD in their practice and also their personal lives. The discussion thus far has answered Moller and Rance (2013) call to empirically investigate the value of PDG to examine the value of PD for proficiency in practice. The value of PD for proficiency in practice can also be garnered from the next theme, SCW practice without PD learning.

9.5 Theme 4: SCW Practice Without PD Learning

This next and final section of the discussion is concerned with answering the overarching research question “Is the PD module from LIT SCW HE programme relevant and beneficial for SCLs, SCWs and their PEP supervisors?”. The third sub-question “What role, relevance and benefit, if any, does PD have in SCW education, PEP and SCW practice?” is also addressed. This is possible when participants share their observations and experiences of SCLs/SCWs with and without PD learning.

A number of participants, all of whom had PD learning, observed the following deficits in colleagues without PD learning; an inability to, self-reflect, reflect on practice or request supervision or support. This could explain the findings of MacGowan (2012) who views much of the literature on group training, and, in particular, the development of professional uses of self, as descriptive or based on outcomes of learning. It was noted by participants that their colleagues without PD learning tended to struggle in their practice, experienced burnout as a result of that inability to open up about their practice and associated emotions and feelings, were more reactionary in their practice and were lacking in self-awareness. This lack of self-awareness had a direct correlation with an inability to recognise triggers or signs of burnout and stress. Karm (2010) reminds us that the “*ability to reflect is a precondition for professional growth*” (p. 203). And since RP is contingent on developing self-awareness this may go some way to explaining the struggles, reported by the participants, that were experienced by non-LIT SCWs.

As Land and Gorden (2013) state RP is “*the desire to explore, to innovate, to seek new insights, unearth new truths, pass on these findings, promote reflection and evaluation, form and transform thinking*” (p. 16). It would appear Green’s (2017) participants, and most likely countless other practitioner’s, have yet to attain sufficient RP capabilities. Perhaps this also explains Farrington’s (1993) beliefs that, with hindsight, people commonly exaggerate what could have been anticipated. It is possible to now understand why Jarvis, Atkins and Murphy (1993) and Mackintosh (1998) are hesitant to agree that reflection provides all it suggests it does, due to insufficient research evidencing the benefits of RP. All this may be true if the foundations upon which RP and self-awareness are built are insufficiently robust to adequately and accurately incorporate them in to one’s practice. The foundations appear to be laid during PD learning. This is commensurate with the views of Ward

(1999, p. 162) when he acknowledges the strength of this training relies on learners reflecting on their experiences, consciously and unconsciously. The participants have described and observed what Banks (2006) refers to as defensive practitioners and what Glumbikova (2020, p. 147) refers to as the self of a technician professional who takes an expression of emotions as something unprofessional.

From a self-care perspective, participants recognised and worked through their issues and identified those SCWs who had not done so. Participants noted the SCW's that had not recognised and worked through their issues were not PD trained. Thus, they did not see the necessity to do so or possess the skills to have engaged with that aspect of practice. It was deemed imperative, by the participants, to have the awareness to examine if you are the right person to engage with that individual otherwise there is a propensity to practice on auto-pilot. Caplan and Thomas (2002) are credited with providing empirical evidence acknowledging how experiential group learning ensures improved use of self and generic practice skills, including "*listening, interpersonal sensitivity, good communication, and focused feedback and support*" (p. 276).

Those without PD learning are deemed to have presented themselves and practised differently to those with PD learning. There appeared to be something unidentifiable or lacking in their presentation and practise, most likely confidence and self-awareness. This is understandable, though not excusable, and lends itself to becoming a defensive SCW. Banks (2006) views defensive practitioners as those that carry out their duties to meet the obligations to the agency, rather than taking the "*right action; personal and agency values tend to be separated, and the latter adopted*" (p. 140). For the most part agency obligations match the "*right action*", however, without RP and self-awareness, it is unlikely agency obligations that do not serve the SCW or the individuals needs will be noticed or discussed with colleagues or during supervision. This resembles Glumbikova's (2020) technician professional mentioned earlier. Another reason why SCWs without PD learning may struggle with seeking support and supervision and engaging in self-awareness, RP, assertiveness and self-care is due to SCWs difficult attachment styles. In particular, Holtz et al., (2011) found learners with an avoidant attachment style tended to disregard their learning needs, lacked awareness of any issues with their performance, and were unwilling to avail of learning opportunities, and were slower to embrace change. However, Flores (2017),

Mahon and Leszcz (2017) and Black (2019) suggest that attachment style is amenable to change through relational interactions in groups. In complete agreement with Saunders et al., (2007) and Stella (2016), unless learners discover how to recognise and attune to their own avoidance patterns, these behaviours will manifest in their professional lives, hindering their ability to establish an effective therapeutic relationship.

The findings and this discussion chapter thus far, demonstrate the difficulties PD learners endured to reach a place where they became comfortable and confident to engage in self-care, RP, supervision, assertiveness and self-awareness. Participants noted the aforementioned was lacking in non-LIT PD trained SCWs. As acknowledged by participants throughout this and previous chapters, initially PD learning was a scary place to reside. Yet, the participants soon discovered that this was normal and many of their group members had the same or similar experiences. Straight away non-LIT PD trained SCWs working with LIT trained SCWs are, according to the participants, at a disadvantage, not knowing the rationale as to why LIT PD trained SCWs are practising as they do. Additionally, PD learning was acquired gradually over 4 years, it is unrealistic to expect non-LIT SCWs to develop PD competencies in the workplace when often the work is intense and unpredictable and time is not devoted to PD learning in practice situations. If self-reflection and awareness is lacking for SCWs without PD learning then this most likely indicates awareness of triggers and limitations have also gone unnoticed. This is something LIT SCWs demonstrated an aptitude for; gaining this knowledge and the mastery was observable in both participants' and respondents' accounts of how they implemented PD in their practice. For LIT SCLs, PD was ingrained into their modus operandi and almost seems to happen seamlessly.

However, PE participants suggest staff in need of self-care are approached differently depending on who has PD training and who does not. It is thought those without PD may subsume that suggestion negatively and as a personal criticism. It has also been noted by participants that their colleagues without PD learning tend to be overly, self-critical, analytical or look externally or apportion blame as to why an incident occurred and can appear closed off around their feelings and emotions. These views from PEs may also correlate to avoidant attachment styles as suggested by Holtz et al., (2011). Bishop (2013), Moss (2012) and Hargie and Dickinson (2011) speak to this when they note self-awareness involves getting to know, like and be in charge of the authentic

self. Perhaps those who do not get to know, like and be in charge of the authentic self, present as defensive practitioners as described by Banks (2006). This could explain why some authors have negative views around RP and supervision. This may further explain why SCW's without PD learning deny or refuse to engage in or incorporate anything resembling PD in to their practice which bears similarities to the behaviours noted by the participants when they first encountered PD. As suggested by Flores, (2017), Mahon and Leszcz (2017) and Black (2019), there is a possibility, then, that PD engagement and learning unintentionally leads to repairing the SCLs avoidant attachment style.

As mentioned earlier with 66% of the population having four or more ACEs then it follows SCW's too must have endured some ACEs. Hence, the necessity for future and current SCW's to examine their ACEs before working in practice. According to the participants, implementing TIC was noticeably more difficult for those without PD learning, particularly to engage with TIC concepts. It is well known and documented that the helping/caring professions attract those who have or are experiencing trauma within their own lives (Zosky, 2013; Fahy, 2007; Rajan-Rankin, 2014; Wilks and Spivey, 2010). SCWs without PD learning are often unaware of the impact they are having on others. Those without PD learning are considered to be at a disadvantage not having experienced opening up and speaking to someone or a group about what is going on for them. This can lead to what Cooper (2012) describes as the ease with which SCW's can cross the boundaries at work without recognising this breach. Self-awareness is key, according to Lyons (2013, p. 108), Beddoe et al., (2011), Langer, (1989), Ownsworth et al., (2000) and Urdang (2010), for SCW and their professional use of self, and it is vital SCW's know and understand their own "*personality, attitudes, values and beliefs*" to avoid any undue influence on their practice. Participants reported capacity to cope with difficult and severely distressing or disturbing situations is considered more challenging for those without PD learning than for those who have had PD learning. Participants and respondents confirmed how frightening it must be for a staff member without PD learning to firstly, work in an organisation whose practice mirrors LIT PD module and secondly, articulate their self-reflection and feelings audibly. Assessment of ability was often based on how well a potential new recruit could demonstrate and articulate their awareness of feelings and emotions.

Non-PD trained SCLs undertaking PEP

In one situation a non-PD trained SCL undertaking his PEP simultaneously with LIT SCLs recognised that PD was a missing element of his own training. PEs who have provided PEP for both LIT SCLs and non-LIT SCLs were best placed to notice the differences between LIT and non-LIT SCLs. Overall, PEs did not experience the engagement of non-LIT SCLs as a good experience, they found it challenging. Non-LIT SCLs were deemed to possess more insecurities than LIT SCLs. PEs were more tactful and less direct when broaching certain topics with non-LIT SCLs to avoid damaging the working relationship. This in part was due to the non-LIT SCL not having adequate self-awareness. Sutton et al., (2015) convey enhanced work competency, communication, self-confidence, and wellbeing are related to self-awareness. It was not that non-LIT SCLs did not bring valuable contributions to their host organisation, it was that they were ill-equipped for the work expected of them during their PEP. SCLs/SCWs must be attuned to the feelings of others. Furthermore, Thompson (2002), Dunne (2002) and Burnard (1992) recognise self-awareness as perception of our customary responses to situations so that we can further develop positive qualities and are alert to negative responses or reactions that could impede effective practice. Knott and Scragg (2016) note increased self-awareness leads our behaviours to become more regulated, leading to more effective professional and personal interactions. Practicing self-awareness culminates in those individuals being more emotionally invested in meeting the standards required of them (Duval and Silvia, 2001; Sheppard, 2007).

Participants and respondents credited PD learning for providing the confidence to engage with individuals and speak up. Many participants found non-LIT learners presented as a little standoffish, lacked confidence and were generally slower to engage with individuals encountered which may also be due to an avoidant attachment style as mentioned earlier. Also they appear more relaxed in the sense of having turned up as being good enough. Many non-LIT SCLs are thought to not fully understand the complexities and ethos of supervision and may often see the supervision process as an accountability exercise rather than sitting down and engaging in RP. In fact, some non-LIT SCLs have not been required to engage in supervision whereas LIT SCLs must engage weekly. From a SCWs perspective, PEs observed the ability to transition to professional supervision was smoother for LIT SCWs than for their non-LIT counterparts. This was mainly due to professional supervision sharing many of the characteristics of PD learning. However, participants

noted providing, requesting and engaging with supervision and even the concept of supervision was difficult for those without PD learning. In organisations with PEs with and without PD learning, those with PD learning were seen to provide more regular supervision than their counterparts. Often, as Green (2017) demonstrates, SCW managers without PD learning or similar either do not provide supervision and when they do, it is infrequent or time constrictive and revolves around task orientated reflections.

A PE participant provided an example of the responses of one LIT SCL and one non-LIT SCL following a home visit. The non-LIT SCW viewed the visit as great whereas the LIT SCL engaged with RP and shared the outcome with their PE. Engaging with PEP/SCW practice necessitates the need to be in touch with one's own feelings, and an awareness of how one is emotionally impacted by situations (Thompson, 2002). It was claimed by participants that without PD learning, LIT SCLs would not know how to engage with, or understand the importance of RP for the benefit of their practise. It was agreed by participants and respondents that PD learners allowed themselves to feel and acknowledge their feelings; in addition to questioning why they might be experiencing the feelings they are feeling. Failure to acknowledge their feelings equated to having a short lived SCW career due to the likelihood of burnout. According to PE participants, those SCLs with PD learning took a more practical approach towards situations and far exceeded what was expected of them in practise. They were also deemed to excel in their roles and could handle situations better than those without PD learning. More importantly, they had the capacity to address any issues particularly if something did not seem right. PD empowered SCWs to be able to do that. Without PD learning participants thought non LIT SCLs/SCWs lacked the confidence to speak up.

9.6 Summary

This chapter was broken into four segments and based around the following themes:

- SCLs/PEs experiences of PDG
- PDs contribution to learning –Theory or PD
- Elements of PD learning transferred to practice
- SCW practice without PD learning

Experiences of PD were varied. The majority of SCLs/PEs participants did not engage with PD learning until the 3rd and 4th year of their SCW programme. Often SCLs and PEs did not realise the relevance and benefit of PD to their practise until they were qualified and practising. Conversely, PEs immediately recognised SCLs engaged in PEP from LIT due to the way they presented and practiced as opposed to learners from other HEIs.

Overwhelmingly, provided with a choice, PE manager's would offer PEP/employment to the person with PD learning as they believed theory could be learned anytime. In addition, bringing PD learning to practise resulted in bringing many of the qualities PEs /managers sought in SCLs/SCWs (see appendix O). In other words, theory whilst seen as having a role in practice was not considered as important as the necessity to have engaged in PD learning.

Elements of PD transferred to practise mirrored many of the PD topics covered such as self-care, self-awareness, RP, boundaries, triggers, self-care, supervision, relationships, family, resilience and loss and grief. Transferring PD learning to practice ensured SCWs had a repertoire and experiences of these elements to draw upon for practise but even more so during difficult work situations.

SCW practise, without PD learning, was deemed difficult for staff as they seemed to lack the ability to be self-aware, engage in RP or self-care. It was also thought they were more likely to experience burnout before their PD trained counterparts. They were also deemed more likely to cross boundaries and be unaware of their impact on others.

What is apparent from this research is the necessity to provide PD learning beyond the first two years of the programme. It also seems the more interactive the participants were in their PD group the more relevant and beneficial PD became to them. Relevance and benefit seem to stem from the lengthy duration of PD. This current study meets with the Kivlighan III et al., (2019) requirement for research to examine processes of these groups connected to attaining development as a learner. This is attained by learning when PD learning brought insight to the participants. For many of the participants, development as a learner began during their first or second PEP; though often only realised retrospectively or by PEs who exclusively accept LIT learners for PEPs due to the level of their PD learning. All participants attained

development as a PD learner in their 4th year of PD and this was built upon and solidified further once working in practice.

This next chapter concludes the entire thesis and also explains how the research question and sub-questions are answered by providing a summary of the salient points from the findings and discussion and concludes with recommendations for practice and further research.

Chapter Ten: Conclusion and Recommendations

10.1 Introduction

In the previous chapter the findings were discussed in relation to findings that corroborated and refuted the literature and what inferences could be discerned as to why this might be the case. This chapter will conclude the entire thesis, it will also explain how the research question and sub-questions are answered by providing a summary of the salient points from the findings and discussion and concludes with recommendations for practice and further research.

10.2 The Research Question

The overarching research question: “Is the PD module from LIT SCW HE programme relevant and beneficial for SCLs, SCWs and their PEs?” In short, What is the role of the PD module for SCLs in HE, PEs and SCWs and their practice?

Sub-questions are provided below:

- How are PD, SCW and PEP defined, conceptualised and operationalised?
- How do participants and respondents articulate the content of their learning and their experience of PD as a pedagogical and practice process?
- What role, relevance and benefit, if any, does PD have in SCW education, PEP and SCW practice?

Each sub question will be addressed individually with explanations provided on how the question was answered and where applicable the findings related to the sub-question summarised.

10.3 How the Research Sub-questions were answered

- 1) How are PD, SCW and PEP defined, conceptualised and operationalised?

This sub-question was primarily addressed and answered in chapters one, two, three and four.

- 2) How do participants and respondents articulate the content of their learning and their experience of PD as a pedagogical and practice process?

This sub-question was addressed and answered in chapters six, seven and eight. Overall, most participants found PD beneficial and relevant following the completion of 2nd year with all participants finding PD beneficial and relevant in 4th year and even more so when they were engaged in SCW practice. The participants did not find PD relevant or beneficial during their PEP. Yet, PEs noted how SCLs from LIT SCW programme had a number of qualities they related to PD learning as opposed to their counterparts from other HEIs engaged in PEP. Some participants reported that they were learning during PD without even realising it. This became apparent when they graduated and began working in SCW practice. Ward's matching principle, relationship building capabilities of the facilitators and PBL all transferred to the participants' practise. The abilities to be more self-aware and engage in RP and self-care also transferred from PD to practise.

- 3) What role, relevance and benefit, if any, does PD have in SCW education, PEP and SCW practice?

This sub-question was addressed and answered in chapters six, seven and eight. PD learning according to participants and respondents provided them with learning that transferred to their practice. PD learning was considered deficient from many other HEI SCW programmes. This PD learning included assertiveness, self-awareness, recognising and knowing triggers, the ability to self-care and maintain mental health, contemplative pedagogies and prevent burnout. PD was also credited with improving participants and respondents confidence to work in various areas of SCW and also to speak up for themselves and advocate for the individuals they work with. Participants and respondents with PD learning were capable of asking for support and embraced supervision. This is mainly because they had developed good communication and assertiveness skills. They are also adept at RP before during and after encounters with individuals encountered in practice. Whilst SCW graduates were generally unable to make links with PD and its relevance or benefit to their PEP, PE participants listed the qualities LIT-SCLs/SCWs bring to PEP and practice, noticeable by the deficit of these qualities in non-LIT SCLs/SCWs. LIT-SCLs were experienced as capable of immersing themselves in the work and forming therapeutic relationships quicker than their counterparts. Conversely, they also treaded more carefully and practised more

mindfully than their counterparts from other HEIs. LIT-SCLs were aware of their feelings and emotions and articulated anything that might require stepping away from a piece of work or from something potentially triggering. It seemed the more difficult practice experiences for SCWs the more relevant and beneficial PD learning became for them.

Theme 4 from the findings and discussion answers this question by alerting us to the pitfalls and challenges encountered by those who did not receive PD learning. Those without PD learning are considered quicker to burnout, are more self-critical and self-blaming and following difficult situations are quick to apportion blame to others. They are also slower to seek support or supervision when struggling. They are inclined, according to participants, to lack adequate self-awareness and are reluctant to engage in RP. Also, they are often unaware of their triggers. They tended to receive offers of support as criticism and internalise it.

10.4 Unexpected Findings

As expected PD learning was subsumed in to SCW learning but the depth to which it was transferred to practice was surprising. Another surprising finding related to the relevance and benefit PD to professional supervision which is two-pronged. Firstly, participants and respondents were cognisant of when supervision and support was necessary and requested supervision assertively. Secondly, their understanding that PD was a two way process and therefore attended supervision prepared, they were unafraid to show their vulnerabilities and could take criticism constructively and were capable of reflecting on the process and understood it was not a process for solely evaluating practice or being reprimanded.

At first I was surprised that it seemed PD learning did not necessarily transfer to PEP but PE participants explained that in comparison to other learners undertaking their PEP that it was apparent to PEs those learners who had gained PD learning. This was noticeable due to the way LIT SCLs engaged with staff, individuals or groups worked with and their levels of self-awareness, RP and engagement with supervision and self-care. This seems to suggest PD learning transfers to PEP and SCW practice subconsciously as well as consciously. The biggest surprise of all was the enormous gulf between SCWs with PD and those without PD learning this was expressed by SCW graduates and PEs and somewhat verified by Green's (2017) study. If as

participants suggest PD is more valuable to SCW practice than theory, one wonders what foundations do non-LIT SCWs have to build their practice?

And finally, incongruity was observable in the findings reported in chapter seven when Declan likened PD to *fairy dust* and requested that PD needs to provide more tools to aid resiliency (see section 7.6), yet earlier in section 7.2 and later in section 7.6, Declan named all the elements of PD that have benefitted him in life and in practice and it appears resiliency from PD learning is implied.

10.5 Concluding Comments on this research

The research questions were answered; PD and SCW were contextualised and operationalised, participants and respondents articulated the content of their learning and their experience of PD as a pedagogical, practice and personal process. PEs believe PD plays a crucial role in SCLs education and practice and offers more to SCW practice than theory alone. The deficits of not having PD learning were clearly outlined by participants in terms of inadequate practices such as confidence, assertiveness, RP and self-awareness and increased levels of burnout for staff without PD.

Both the findings and literature seem to substantiate the notion that the PD module from LIT SCW HE programme is both relevant and beneficial for SCLs, SCWs and their PEs. It is the anchor from which SCWs can practice and maintain their wellbeing. PD was constantly adapted, readapted and refashioned by participants and respondents to fit the needs of their practice.

The key to the relevance and benefit of PD, I believe, is the modules duration across the entire four years of the programme, interspersed with two PEP's each of fifteen week duration. Possibly, PDGs from other disciplines are provided for one semester or yearlong at most. Following evaluation, it is found that one semester or yearlong module is insufficient to gain required learning transferable to practice situations. These findings show that only 5 participants engaged with PD from year one, yet at the conclusion of 4th year, all participants and respondents had fully engaged and recognised the relevance and benefits of PD to their immediate and future practice and this was further solidified with more SCW practice experience and even more so relative to the intensity of the work.

As chapter two demonstrated there have been an abundance of reports, policies and legislation over the years concerning protecting the welfare of the vulnerable and still abuse occurs. It is difficult to foresee how the implementation of the SoP can fully address what seems to be the existing gulf between those with PD learning and those without, if anything I think it will favour those termed in the literature as technicist professionals and as Menzies Lyth (1997) quite rightly acknowledged, getting caught up in rules, control, policies and disciplining, negates the requirement to examine self in any great detail. Examining self is critical to safe practice and all the aspects that derive from that self-examination and applied to practice are vital.

Interestingly, none of the reviewed studies seem to specifically link their group work to a lecture-group format. Whilst lecture was not seen as beneficial or relevant to PDG, I suggest it sets the scene theoretically and informed the PDG material. As could be detected throughout this research, elements of PD education and SCW practice have numerous commonalities (Maughan, 2016). For this reason, I believe, encountering PBL and what is modelled and experienced in PDG is a natural foundation upon which SCWs can individually progress PD and to carry that progression in to their SCW practice and life. PD has been described by participants as transformative. This is also observable when the chasm in first year is so wide and then narrowed the closer SCLs came to completing the SCW programme.

Overall, the findings demonstrate PD is relevant and beneficial to SCLs, PEs and SCWs, however, since this is the first study investigating if PD is relevant and beneficial to SCLs, PEs and SCWs, further research is necessary to confirm or refute these findings.

10.6 Limitations of this study

It was not possible to compare affect from SCWs with and without PD on the individuals worked with for this research. However, those with PD learning could see a deficit in those without PD learning. It was thought that boundaries were more likely to be breached and those SCWs without PD were likely to burnout sooner than their PD trained counterparts. This was partly due to not engaging in RP, lacking self-awareness and not seeking support during or when difficult situations have been encountered.

Another limitation of the study was the newness of google forms as a research instrument. The limitation of the form lies in its inability to discern when the same person has submitted twice or when they answered no, it allowed the respondent to continue filling in the diary. These limits are not insurmountable and I would utilise google forms again as a research instrument. I would robustly test it for further flaws that were not apparent during this research.

Despite efforts to recruit non-Irish born participants, only one non-Irish born SCW graduate and one PE participant participated. Each of those participants attempted to encourage others to participate to no avail. Perhaps this was due to being employed in other professions other than SCW which was a prerequisite to participating. The final limitation was the difficulty in finding LIT SCW trained PEs, this will not be problematic in the future since all PEs supervising SCLs during their PEP must be SCW trained.

10.7 New Knowledge

This research has contributed to new knowledge in a number of ways:

- This is the first study investigating if PD is relevant and beneficial to SCLs, PEs and SCWs.
- A gap in the literature identified by Moller and Rance (2013), LaRocque, (2017) and Payne, (2010), was addressed, as they claim a number of authors suggest empirical support for the effectiveness or ease of applicability of PD in practice settings remains limited. The overarching research question and elements of sub-question 3, “What role, relevance and benefit, if any, does PD have in SCW education, PEP and SCW practice” address the aforementioned gap in the literature.
- Kivlighan III et.al., (2019) suggests research to examine processes of PD groups connected to attaining development as a learner is required. Again, the overarching research question and sub-question 2 and elements of sub-question 3, “What role, relevance and benefit, if any, does PD have in SCW education ...” addressed the aforementioned gap in the literature.
- Eskridge et. al., (2013) believe research that determines potential therapeutic benefits of PD/growth groups to its members is lacking. Whilst PD is not named specifically as therapeutic, the participants and respondents alluded to the

therapeutic components of PD particularly around their engagement with contemplative pedagogies, RP and self-care strategies. However, further research that specifically addresses this gap is required. In section 6.3 Ann mentions the therapeutic value of PD as does Conan in section 7.5. In section 8.2 respondents alluded to the therapeutic nature of the supervision they engage in which may correlate to their experiences of PD since learning from PD mirrors how the participants and respondents engaged with supervision.

- Incidentally, Salloum et al., (2015) refers to the lack of empirical research examining the benefits of self-care. The participants and respondents in this research describe the benefits of self-care. In summary, they agreed that self-care was beneficial to avoid burnout, for mental wellbeing and to avoid stress becoming overwhelming.
- Additionally Spencer (2006) seeks answers to the following:

we may still need to address a lack of clarity in relation to personal development training. What do we really mean by it? How we can help all students achieve it? How can we assess students' personal development? How do we really know when students are not engaging in personal development work? Can we as a profession afford to devote so much training time to activities which we either don't assess, or don't know how to assess, and for which we have little research evidence of its effective contribution to counsellor development? This is a plea for further debate and research (p. 113).

These questions were answered incrementally throughout this research by providing definitions of PD and with a review of the most pertinent PD studies and later the PD curriculum and assessment process in sections 3.4 followed by the findings. The plea for further debate and research is warranted.

10.8 Recommendations for Further Research

There is so much scope for further study. I would recommend the following research studies:

- Since every participant found PD relevant and beneficial, I am interested in actively seeking potential participants who may not have had the best experiences of PD and ascertain why this may be the case.
- Participants from this research implied that as graduates they felt ready for practice. Further research is required to ascertain if SCL participants from all

HEIs offering SCW programmes felt this readiness for practice and what leads to that felt readiness or unreadiness.

- To consider where PD is congruent and incongruent with the work of many authors individually to whom only a snapshot of their work could be considered for this thesis; works such as Brene Brown, Carl Rogers and Carl Jung, Donald Winnicott and Barbara Dockar-Drysdale and other theories such as TIC, Transformative learning theories, PBL, Social learning theories, Threshold concepts and Attachment theories.
- Further investigation is warranted on how ACEs affect SCLs and what strategies can educators implement to assist learners carrying trauma.
- A timely study on how PD maps to the SoP is also warranted.
- A scoping study is also justified to investigate further, if and what theories are utilised in SCW practice as the literature reviewed in this study indicated that theory and its adaptation to social work practice was a contested element of practice and at best inconsistent. Could this be true of SCW practitioners?
- Many non-Irish SCW graduates seem to be employed as care assistants and perhaps that is what led to their ineligibility to participate in the current study. Further research is required to track their career paths following graduation.
- Since ethical approval is difficult to obtain for action research with one's own learners, I propose asking current 1st years to keep copies of their journals and written assignments over their four years of SCW study and seek their consent upon graduation to carry out a content analysis on their PD work to chart exactly when PD moved from liminality through to the descriptive, the reflective and the analytical phases.

10.9 Recommendations for Further SCW Practice

If, as the literature suggests, 90% of counsellor trainees receive PDG learning or similar and they see clients for 1 hour per week, surely, it is critical that those working in relationship with individuals and groups daily for 8, 12, 24 hour shifts receive PD learning. I would expect this PD learning would act as a protective factor to safeguard the SCWs and the individuals worked with, thus augmenting their safety and wellbeing.

Additionally, I would strongly urge organisations whose remit it is to provide services for the most vulnerable in our society to provide PD learning for all their employees. Once the tenets of PD are grasped the PD learning seems to remain with the learner

and is adapted and moulded to their future practice. PD learning remained with SCLs since their graduation, more so than any other academic learning. Providing PD modules may be costly at the outset but PD has the potential to be cost effective for organisations if burnout can be prevented, wellbeing maintained and safe practices adhered to for the benefits of the individuals worked with.

10.10 Recommendations for further PD Pedagogy

Where HEIs are providing programmes designed for learners to work with the most vulnerable in our society I recommend PD must form a larger part of programme curricula. Much of the literature reviewed found, for the most part, PD learners to have negative views of their experiences of PDGs. Feelings and emotions were considered negative by authors and their participants, but in reality these participants were actually in what I would call the crucial phase of PD, just beginning to unravel, agitate and understand those occurrences and make connections for themselves based on their experiences of their PDGs. In other words, literature pertinent to PD seemed to suggest that PD offerings ceased just before any transformative learning from these negative or uncomfortable moments could be realised. If I had asked my participants these research questions after 1st and 2nd year of their PD learning, I believe I would have found what other authors reviewed in this research found. PD is “bad” and causes “uncertainties”.

Improvements to the early stages of PD pedagogy should include the following; ensure everyone at the outset of PD is clear on what it is and is not- it is psychoeducational and possibly therapeutic but it is not counselling. Inviting a 4th year learner or graduate to a PD lecture to tell of their experiences of PD may bring more clarity and less fear around the PD process. Ensure the students are not abandoned in any shape or form, that their offering in PDG, no matter how miniscule it may be perceived, are valued and that all learners feel held and valued. That means the facilitator must be skilled in therapeutic group work. If materials are introduced during a PDG, explain the rationale and how it can be used in practise, either prior or post activity. It is advisable not to introduce material or activities to solely keep the PD learners occupied thus avoiding any of the deeper work which may surface organically. Reassure the PDG members that they should go at their own pace and when they feel ready and not because a group member has delved deeper in to a topic under consideration. Regularly remind the PDG members why they are experiencing PD. Finally, I would recommend

providing PD as CPD for those with and without PD learning who are working or intend to work with vulnerable populations.

References

- Adorjan, M. & Kelly, B. (2008). Pragmatism and 'Engaged' Buddhism: Working Toward Peace and a Philosophy of Action. *Human Architecture: Journal of the Sociology of Self-Knowledge*. 6, 37.
- Ainsworth, M. D. S. (1978). *Patterns of attachment*. Hillsdale, N.J, Lawrence Erlbaum Associates.
- Alaszewski, A. (2006). *Using diaries for social research*. London, UK: Sage.
- Alberti, R. E., & Emmons, M. L. (2017). *Your perfect right: Assertiveness and equality in your life and relationships*. Oakland, CA: New Harbinger Publications, Inc.
- Allen, P. (2007). *Resources for learning mentors: Practical activities for group sessions*. London: Paul Chapman.
- Allen, S., & Tracy, E. (2008). Developing student knowledge and skills for home-based social work practice. *Journal of Social Work Education*, Vol. 44, No. 1, 125-143.
- Allport, F. H. (1955). *Theories of perception and the concept of structure: A review and critical analysis with an introduction to a dynamic-structural theory of behavior*. New York. John Wiley & Sons Inc. <https://doi.org/10.1037/11116-000>.
- Alvesson, M., & Sköldbberg, K. (2009). *Reflexive methodology*. Sage.
- American Psychiatric Association, (2013). American Psychiatric Association. *Diagnostic and statistical manual of mental disorders*. 5th ed. Arlington, VA.
- Ardito, R. B., & Rabellino, D. (2011). Therapeutic alliance and outcome of psychotherapy: historical excursus, measurements, and prospects for research. *Frontiers in Psychology*, 2 :270. doi: 10.3389/fpsyg.2011.00270.
- Argyris, C. (1976). *Increasing leadership effectiveness*. New York: Wiley.
- Armeli, S., Todd, M., and Mohr, C. (2005). A Daily Process Approach to Individual Differences in Stress-Related Alcohol Use. *Journal of Personality*, 73, 1657-1686.

- Arntz, A. (2017). Schema therapy. In A. Wenzel (Ed.), *The sage encyclopedia of abnormal and clinical psychology* (Vol. 1, pp. 2923-2926). SAGE Publications, Inc., <https://www.doi.org/10.4135/9781483365817.n1173>.
- Atkins, S. and Murphy, K. (1993) Reflection: A review of the literature, *Journal of Advanced Nursing*, 18, 1188-92.
- Aurini, J.D, Heath, M. and Howells, S. (2016). *The How to of Qualitative Research: Strategies for Executing High Quality Projects*. London: Sage.
- Available at: <http://www.childabusecommission.ie/rpt/04-04.php>.
- Azadegan, A. and Kolfshoten, G. (2014) An Assessment Framework for Practicing Facilitator. *Group decision and negotiation*, 23 (5), pp. 1013-1045.
- Azeem, M. W., Aujla, A., Rammerth, M., Binsfeld, G., & Jones, R. B. (2011). Effectiveness of Six Core Strategies Based on Trauma Informed Care in Reducing Seclusions and Restraints at a Child and Adolescent Psychiatric Hospital. *Journal of Child and Adolescent Psychiatric Nursing*, 24, 1, 11-15.
- Azer, S. (2005). Challenges Facing PBL Tutors: 12 Tips for Successful Group Facilitation, *Medical Teacher*, Vol. 27, No. 8, p. 676-681.
- Baker, C. N., Brown, S. M., Wilcox, P., Verlenden, J. M., Black, C. L., & Grant, B.-J. E. (2018). The implementation and effect of trauma-informed care within residential youth services in rural Canada: A mixed methods case study. *Psychological Trauma: Theory, Research, Practice, and Policy*, 10(6), 666–674. <https://doi.org/10.1037/tra0000327>.
- Baluch, S. (2000). Young men talking. *About Campus, Enriching the Student Learning Experience*, 5, 3, 32.
- Bandura, A. (2010). *Self-efficacy in Changing Societies*. Cambridge University Press.
- Bandura, A., & Walters, R. H. (1963). *Social learning and personality development*. Holt, Rinehart And Winston.

- Banks, S. (2006). *Ethics and Values in Social Work (Third Edition)*. Basingstoke: Palgrave.
- Banks, S. (2012) *Ethics and Values in Social Work (4th ed)* London: Palgrave & McMillan.
- Banks, S. (2012). Professional Integrity, Social Work and the Ethics of district. *Social work and Social Science Review*. 11 (2), pp. 20-35.
- Banta, T., Lund, J., Black, K., & Oblander, F. (1996). *Assessment in Practice: Putting Principles to Work on College Campuses*. San Francisco: Jossey-Bass.
- Barbezat, D. P., & Bush, M. (2014). *Contemplative practices in higher education: Powerful methods to transform teaching and learning*. San Francisco, California: Jossey-Bass.
- Barnard, A (2010). *Key issues in Health and Social Care: A Companion to Learning*. New York: Routledge.
- Barnett, R. (2007). *A will to learn: Being a student in an age of uncertainty*. Maidenhead ; New York : McGraw Hill, Society for Research into Higher Education & Open University Press.
- Barrett, T., (2017). *A New Model of Problem-based learning: Inspiring Concepts, Practice Strategies and Case Studies from Higher Education*. Maynooth: AISHE.
- Barros, R. (2012). *From lifelong education to lifelong learning. Discussion of some effects of today's neoliberal policies*. *European journal for Research on the Education and Learning of Adults* 3 (2012) 2, S. 119-134.
- Bartkeviciene, A. (2014). Social work students experiences in “self” and professional “self” awareness by using the art therapy method. *European scientific journal*, 10, 12-23. DOI:10.19044/ESJ.2014.V10N5P%P.
- Bartlett, R., and Milligan, C. (2015). *What is diary method?* London, Bloomsbury Academic.

- Baumeister, R. F. (2009). *The self in social psychology*. New York, NY; Abingdon, Oxon : Psychology Press.
- Baumeister, R. F. (2013). *Self-Esteem: The Puzzle of Low Self-Regard*. New York, NY: Springer.
- Beard, C. & Wilson, J. P. (2018). *Experiential learning: a practical guide for training, coaching and education*. NY, USA : Kogan Page Limited.
- Beck, U. (1992). *Risk society: Towards a new modernity*. London; Newbury Park, Calif: Sage Publications.
- Becker, H. S. (1963). *Outsiders: Studies in the sociology of deviance*. New York: Free Press.
- Beddoe, L., Ackroyd, J., Chinnery, S.-A., & Appleton, C. (2011). Live Supervision of Students in Field Placement: More than Just Watching. *Social Work Education*, 30, 5, 512-528.
- Bell, T., & Romano, E. (2017). Permanency and Safety Among Children in Foster Family and Kinship Care: A Scoping Review. *Trauma, Violence, & Abuse*, 18(3), 268–286.
- Bénabou, R., & Tirole, J. (2002). Self-Confidence and Personal Motivation. *The Quarterly Journal of Economics*, 117, 3, 871-915.
- Benson, J. (2010). *Working more creatively with groups*. 3rd ed. USA: Routledge.
- Berger, R. (1996). A Comparative Analysis of Different Methods of Teaching Group Work. *Social Work with Groups*, 19, 1, 79-90.
- Bernard, H. R. (2018). *Research methods in anthropology: Qualitative and quantitative approaches*. Lanham : Rowman & Littlefield.
- Bernstein, B. (1971). On the classification and framing of educational knowledge. In M. Young (Ed.), *Knowledge and control* (pp. 47–69). London: Collier-Macmillan.
- Bettelheim, B. (1950). *Love is not enough: The treatment of emotionally disturbed children*. New York: Focal Press.

- Bieschke, K. J., Gehlert, K. M., Wilson, D., Matthews, C. R., & Wade, J. (2003). Qualitative Analysis of Multicultural Awareness in Training Groups. *The Journal for Specialists in Group Work*, 28, 325-338.
- Biestek, F. P. (1961). *The casework relationship*. London: Unwin University Books.
- Bijoux, D., & Myers, J. (2006). Interviews, solicited diaries and photography: 'new' ways of accessing everyday experiences of place. *Graduate Journal of Asia-Pacific Studies* 4 44–64.
- Bion, W. R. (1961/2010). *Experiences in groups: And other papers*. London: Routledge.
- Bion, W. R. (1967a). *Second thoughts*. London: Maresfield Library.
- Bion, W. R. (1994). *Learning from Experience*. London: Karnac Books.
- Birnbaum, M. L., & Cicchetti, A. (2005). A model for working with the group life cycle in each group session across the life span of the group. *Groupwork*, 15, 3, 23-43.
- Bishop, S (2013). *Develop your assertiveness*. London, UK. Kogan Page.
- Black, A. E. (2019). Treating Insecure Attachment in Group Therapy: Attachment Theory Meets Modern Psychoanalytic Technique. *International Journal of Group Psychotherapy*, 69, 3, 259-286.
- Bloom, S. L. (2010). *Organizational Stress as a Barrier to Trauma-Informed Service Delivery*. In Becker, M. and Levin, B. A Public Health Perspective of Women's Mental Health, New York: Springer (pp.295-311).
- Bloom, S. L., & Farragher, B. J. (2013). *Restoring sanctuary: A new operating system for trauma-informed systems of care*. Oxford [u.a.: Oxford Univ. Press.
- Bogdan, R., & Biklen, S. K. (2003). *Qualitative research for education: An introduction to theory and methods*. Boston: Allyn and Bacon.
- Bogo, M. (2015). Field Education for Clinical Social Work Practice: Best Practices and Contemporary Challenges. *Clinical Social Work Journal*, 43, 3, 317-324.

- Bolger, N., Davis, A., & Rafaeli, E. (2003). Diary methods: Capturing life as it is lived. *Annual Review of Psychology*, 54, 579–616.
- Bolton, G. E. J. (2010). *Reflective Practice: Writing and Professional Development*. London: Sage Publications.
- Boss, P. (2006). *Loss, trauma, and resilience: Therapeutic work with ambiguous loss*. New York: W.W. Norton & Co.
- Bostrom, R.,P., Anson, R.,. Clawson, V.,K., (1993). *Group facilitation and group support systems Group support systems: New perspectives*. Macmillan.
- Boud, D., & Feletti, G. (1991). *The challenge of problem based learning*. London: Kogan Page.
- Boud, D., Keogh, R., & Walker, D. R. (1985). *Reflection: Turning experience into learning*. London: Kogan Page.
- Bourdieu, P. (1979). *Distinction: A social critique of the judgement of taste*. London: Routledge & Kegan Paul.
- Bourdieu, P. (1997). *The forms of capital*. In Halsey, A. H., Lauder, H., Brown, P., & Wells, A. S. (Eds.), *Education: Culture, economy, society*. Oxford: Oxford University Press, pp. 46–58.
- Bowlby, J. (1969). *Attachment*. New York: Basic Books.
- Bowlby, J. (1980). *Attachment and loss*. New York: Basic Books.
- Boyd, R. (1991). *Personal Transformation in Small Groups*. London, Routledge.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3 (2): 77-101.
- Braun, V., & Clarke, V. (2013) . *Successful qualitative research: A practical guide for beginners*. London: Sage.
- Braun, V., & Clarke, V. (2021). *Thematic Analysis*. In Lyons, E., & Coyle, A. (Eds.). . *Analysing qualitative data in psychology* (pp. 128- 148). L.A, SAGE.

- Brendtro, L., & Ness, A. (1983). *Re-educating troubled youth: Environments for teaching and treatment*. New York: Walter du Gruyter.
- Bride, B. E. (2007). Prevalence of Secondary Traumatic Stress among Social Workers. *Social Work*, 52, 1, 63-70.
- Bingle, R. G., & Hatcher, J. A. (2009). Innovative Practices in Service-Learning and Curricular Engagement. *New Directions for Higher Education*, 147, 147, 37-46.
- Britton, J. J. (2014). *From One to Many: Best Practices for Team and Group Coaching*. John Wiley & Sons.
- Britton, W., Brown, A.-C., Kaplan, C. T., Goldman, R. E., DeLuca, M., Rojiani, R., ... Frank, T. (2013). Contemplative science: An insider prospectus. *New Directions for Teaching and Learning*, 134, 13–29. doi:10.1002/tl.20051.
- Bronfenbrenner, U., (1979). *The Ecology of Human Development*. Cambridge: Harvard University Press.
- Brookfield, S. (2007). *The power of critical theory for adult learning and teaching*. Maidenhead, U.K: Open University Press.
- Brookfield, S. D., (2009). *Becoming a critically reflective teacher*. San Francisco, Calif: Jossey-Bass.
- Brooks-Harris, J. E., & Stock-Ward, S. R. (1999). *Workshops: Designing and facilitating experiential learning*. Thousand Oaks, Calif: Sage Publications.
- Brown, A. G. (1994). *Groupwork*. Aldershot: Ashgate. 3rd Ed.
- Brown, B. (2012). *Daring greatly: How the courage to be vulnerable transforms the way we live, love, parent, and lead*. Penguin Publishing Group.
- Brown, G. and Atkins, M. (1988). *Effective Teaching in Higher Education*. London: Routledge.
- Brown, K. W., & Ryan, R. M. (2003). The benefits of being present: Mindfulness and its role in psychological well-being. *Journal of Personality and Social Psychology*, 84, 822–848. <http://dx.doi.org/10.1037/0022-3514.84.4.822>

- Brown, N. W. (2008). *Psychoeducational groups: Process and practice*. New York: Routledge.
- Brown, N. W. (2018). *Conducting effective and productive psychoeducational and therapy groups: A guide for beginning group leaders*. London : Routledge.
- Brown, R., (1999). '*Group Processes: Dynamics within and Between Groups*' (2nd Edn.) Oxford: Wiley Blackwell.
- Bruce, L. (2013). *Reflective Practice For Social Workers: A Handbook For Developing Professional Confidence*. McGraw-Hill.
- Bryman, A. (2016). *Social Research Methods*, 5th ed., Oxford: Oxford University Press.
- Bryson, S.A., Gauvin, E., Jamieson, A., Rathgeber, M., Faulkner-Gibson, L., Bell, S., ... Burke, S., (2017). What are effective strategies for implementing trauma-informed care in youth inpatient psychiatric and residential treatment settings? A realist systematic review. *International Journal of Mental Health Systems*, 11:36.
- Buber, M., (2004). *I and Thou*. London: Continuum.
- Buckley, H., (2012) "Using Intelligence to Shape Reforms in Child Protection," *Irish Journal of Applied Social Studies: Vol. 12: Iss. 1, Article 6*. doi:10.21427/D7MX50.
- Bunston, W. (1997). 'Encouraging therapeutic reflection in child and adolescent protective services', *Australian & New Zealand Journal of Family Therapy*, vol. 18, no. 2, pp. 61–69.
- Burke, H. (1987). *The People and The Poor Law in 19th Century Ireland*. Dublin: Web Press.
- Burlingame, G. M., McClendon, D.T. & Alonso, J. (2011). Cohesion in group therapy. *Psychotherapy (Chicago, Ill.)*. 48, 34-42.
- Burnard, P. (1992). *Communicate!: A communication skills guide for health care workers*. Hodder.

- Burnard, P. (1997). *Effective Communication Skills for Health Professionals*. Cheltenham: Stanly Thornes Publishers Ltd.
- Burton, C., Weller, D., & Sharpe, M. (2007). Are electronic diaries useful for symptoms research? A systematic review. *Journal of Psychosomatic Research*, 62, 553-561.
- Butler, L. D., Carello, J., & Maguin, E. (2016). Trauma, Stress, and Self-Care in Clinical Training: Predictors of Burnout, Decline in Health Status, Secondary Traumatic Stress Symptoms, and Compassion Satisfaction. *Psychological Trauma: Theory, Research, Practice, and Policy*. Advance online publication. <http://dx.doi.org/10.1037/tra0000187>.
- Calhoun, B., Bartolomucci, C. L., & McLean, B. A. (2005). Building connections: Relational group work with female adolescent offenders. *Women & Therapy*, 28, 17-19.
- Campbell, J., & Moyers, B., D. (1988). *The power of myth*. New York: Anchor Books.
- Caplan, T., & Thomas, H. (2002). The forgotten moment: Therapeutic resiliency and its promotion in social work with groups. *Social Work with Groups*, 24, 5–26.
- Carlile, O., & Jordan, A. (2009). *The centre cannot hold: Challenging student-centred learning*. In L. Carey, H. Guerin, S. Huntley-Moore, S. Magennis, & B. McMillin (Eds.), *Proceedings AISHE-C 2009*, NUI Maynooth, Ireland. Retrieved from <http://ocs.aishe.org/index.php/international/2009/paper/view/90>.
- Carter, P., Hickman, J., McDonald, P., Patton, R., & Powell, D. (1986). Memorandum on applied and experiential learning curriculum development. *AACSB Task Force Report*. (Carter et. al 1986 AACSB memorandum 1986:3).
- Cartwright, S., (2002). Double-Loop Learning: A Concept and Process for Leadership Educators. *Journal of Leadership Education*, 1(1), p. 69.
- Carver, C. S., & Scheier, M. F. (1998). *On the self-regulation of behaviour*. Cambridge: Cambridge University Press.

- Cassidy, J., and Shaver, P.R. (2016). Handbook of attachment: theory, research, and clinical applications. New York, NY : The Guilford Press.
- Castillo-Montoya, M. (2016). Preparing for interview research: The interview protocol refinement framework. *The Qualitative Report*, 21(5), 811-831.
- Centeno, R. P. R. & Fernandez, K. T. G. (2020). Effect of Mindfulness on Empathy and Self-Compassion: An Adapted MBCT Program on Filipino College Students. *Behavioral Sciences*. 10.
- Charbonneau, D. (2019). Model of mindfulness and mental health outcomes: Need fulfillment and resilience as mediators. *Canadian Journal of Behavioural Science / Revue Canadienne Des Sciences Du Comportement*, 51, 4, 239-247.
- Cheung, F, K. (2014). *A song in the Night: A Personal Journey of Hope: Grieving, Healing and Rebuilding*. Bloomington: West bow Press.
- Children Act 2008* <https://www.legislation.gov.uk/ukpga/Edw7/8/67/contents/enacted>.
- Chirumbolo, A., Livi, S., Mannetti, L., Pierro, A., & Kruglanski, A. W. (2004). Effects of need for closure on creativity in small group interactions. *European Journal of Personality*, 18, 4, 265-278.
- Chödrön, P. (1993). No Right, No Wrong. An interview with Pema Chödrön. In *Tricycle, Fall, 1993 Vol 3, No 1*. Available at <https://tricycle.org/magazine/no-right-no-wrong/>.
- Chodron, T. (2004). *Taming the mind*. Ithaca, N.Y., Snow Lion Publications.
- Choi, K. M., & Protivnak, J. J. (2016). Leaping Into the Unknown: Experience of Counseling Students Participating in Group Work With International Students. *Journal for Specialists in Group Work*, 41, 3, 238-261.
- Chwang, E., (2008). Against the inalienable right to withdraw from research. *Bioethics*, 22(7), pp. 370-378.
- Cilliers, F. (2000). Facilitation skills for trainers. *SA Journal of Industrial Psychology*, 26(3), pp. 21-26. In a Changing Ireland has Social Care Practice Left

- Clarke, M., (2006). 'In a Changing Ireland, has social care practice left religious and spiritual values behind?' - An Introduction in Doyle, J., & Gallagher, C., (2006). *In a Changing Ireland has Social Care Practice left Religious and Spiritual Values behind*. Dublin Institute of Technology.
- Clark, T., Foster, L., & Bryman, A. (2019). *How to do your social research project or dissertation*. Oxford, Oxford University Press.
- Clarke, N. (2017). 'Overview of a Group Work Programme: The Choices and the Challenges', *Irish Probation Journal*, 14, pp. 152.
- Clarke, V., & Braun, V. (2017). Thematic analysis. *Journal of Positive Psychology*. 12, 297-298.
- Clarkson, G. P., & Hodgkinson, G. P. (2007). What can occupational stress diaries achieve that questionnaires can't? *Personnel Review*, 36, 684–700. doi:10.1108/00483480710773990.
- Clegg, S. and Bradley, S. (2006). Models of Personal Development Planning: practice and processes. *British Educational Research Journal*, 32: 57-76. doi:10.1080/01411920500402003.
- Clemans, S. (2011). The purpose, benefits and challenges of “check-in” in a group-work class. *Social Work with Groups*, 34(2), 121–140. doi:10.1080/01609513.2010.549640.
- Coburn, A., & Gormally, S. (2017). Critical Reflexivity. *Counterpoints*, Vol. 483, *Communities for Social Change: Practicing Equality and Social Justice in Youth and Community Work*, pp. 111-126.
- Cochrane, S. F., & Hanley, M. M. (1999). *Learning through field: A developmental approach*. Boston, Mass: Allyn and Bacon.
- Cohen, D. J., Leviton, L. C., Isaacson, N., Tallia, A. F., & Crabtree, B. F. (2006). Online Diaries for Qualitative Evaluation: Gaining Real-Time Insights. *American Journal of Evaluation*, 27, 2, 163-184.

- Collington, V., and Hunt, S., C. (2006). Reflection in midwifery education and practice: an exploratory analysis. *Evidence-Based Midwifery*, vol. 4, no. 3.
- Collins, K. S., & Lazzari, M. M. (2009). *Co-leadership*. In A. Gitterman & R. Salmon (Eds.), *Encyclopaedia of social work with groups* (pp. 299-302). New York: Routledge.
- Colman, D. E., Echon, R., Lemay, M. S., McDonald, J., Smith, K. R., Spencer, J., & Swift, J. K. (2016). The efficacy of self-care for graduate students in professional psychology: A meta-analysis. *Training and Education in Professional Psychology*, 10, 188 –197. <http://dx.doi.org/10.1037/tep0000130>.
- Conley, C. S., Durlak, J. A., & Dickson, D. A. (2013). An Evaluative Review of Outcome Research on Universal Mental Health Promotion and Prevention Programs for Higher Education Students. *Journal of American College Health*, 61, 5, 286-30.
- Connor, M. (1994). *Training the Counsellor*. London: Routledge.
- Conrath, D.W., Higgins, C. A. & McClean, R. J., (1983). A Comparison of the Reliability of Questionnaire Versus Diary Data. *Social Networks; Sep1983, Vol. 5 Issue 3, p315-322, 8p*.
- Consedine, N. S. & Magai, C. (2006). *Emotion development in adulthood: A developmental functionalist review and critique*. In C. Hoare (Eds.), *The Oxford handbook of adult development and learning* (pp. 209-244). New York, NY: Oxford University Press.
- Conway, C. M. (2020). *Collecting, analyzing and reporting data: an Oxford handbook of qualitative research in American music education*. New York : Oxford University Press.
- Conyne, R. K. (1998). What to look for in groups: Helping trainees become more sensitive to multicultural issues. *The Journal for Specialists in Group Work*. 23, 22-32.
- Cooke, J. E., Racine, N., Plamondon, A., Tough, S., & Madigan, S. (2019). Maternal adverse childhood experiences, attachment style, and mental health: Pathways

of transmission to child behavior problems. *Child abuse & neglect*, 93, 27–37.
<https://doi.org/10.1016/j.chiabu.2019.04.011>

Cooley, C. H. (2015). *Human nature and the social order* (revised ed). Miami, FL: Hard Press Publishing.

Cooley, C., H. (2017). *Life and the Student: Roadside Notes on Human Nature, Society, and Letters*. London: Taylor and Francis.

Cooper, F. (2012). *Professional Boundaries in Social Work and Social Care: A Practical Guide to Understanding, Maintaining and Managing Your Professional Boundaries*. United Kingdom: Jessica Kingsley Publishers.

Cooper, M., Hedges, H., & Ashurst, L. (2014). Transforming relationships and curriculum: Visiting family homes. *Early Childhood Folio*, 18, 1.)

Coopersmith, S. (1967). *The Antecedents of Self-Esteem*. San Francisco.

Corey, G. (2009). *Theory and Practice of Counselling and Psychotherapy, 8th Ed*, California: Thomson Higher Education.

Corey, G., Corey, G., & Corey, G. (2009). *Student manual for Theory and practice of counseling and psychotherapy*. Belmont, CA: Thomson Brooks/Cole.

Corey, M. S., Corey, G., & Corey, C. (2014). *Groups: Process and practice*. Thomson Brooks/Cole. Cengage learning.

Corey, M. S., Corey, G., (2002) *Groups: Process and practice*. Brooks/Cole-Thomson Learning.

Corey, M. S., Corey, G., (2008) *Groups: Process and practice*. Brooks/Cole-Thomson Learning.

CORU (2017). *Launch of Education Standards for Regulation: Social Care Workers Registration Board. Presentation*. Dublin. May 31st 2017. Available at http://coru.ie/uploads/documents/CSoP_Launch_01.06.17_AS.pdf.

CORU (2017). Social Care Workers Registration Board: *Standards of Proficiency for Social Care Workers*. Ireland.

CORU. <https://coru.ie/>

Cottrell, S. (2003). *The Study Skills*. Handbook. 2nd Edition.

Courtois, C. A., & Gold, S. N. (2009). The need for inclusion of psychological trauma in the professional curriculum: A call to action. *Psychological Trauma: Theory, Research, Practice and Policy*, 1, 3–23. <http://dx.doi.org/10.1037/a0015224>.

Cousin, G. (2008). *Threshold concepts: Old wine in new bottles or new forms of transactional curriculum inquiry?* In R. Land, J. Meyer, & J. Smith (Eds.), *Threshold concepts within the discipline* (pp. 261-273). Rotterdam, The Netherlands: Sense Publishers.

Cousin, G. (2010). Neither teacher-centred nor student-centred: threshold concepts and research partnerships. *Journal of Learning Development in Higher Education*, Issue 2: February 2010.

Cozolino, L., & Sprokay, S. (2006). Neuroscience and adult learning. *New Directions for Adult and Continuing Education*, 110, 11–19. doi:10.1002/ace.214.

Cranton, P. (2016). *Understanding and Promoting Transformative Learning: A Guide to Theory and practice*. Sterling, Virginia : Stylus Publishing.

Creswell, J. W. (2007). *Qualitative inquiry and research design: Choosing among five traditions*. Thousand Oaks, Calif: Sage.

Creswell, J. W. (2013). *Qualitative research design. Choosing among five approaches*. 3rd ed. Los Angeles (CA): Sage.

Creswell, J. W., & Plano, C. V. L. (2018). *Designing and conducting mixed methods research*. SAGE Publications, Inc.

Creswell, J.W., & Creswell, J.D. (2017). *Research Design: Qualitative, Quantitative, and Mixed Methods Approaches*, 5th ed., London: Sage.

Crittenden, P. M., & Ainsworth, M. D. S. (1989). *Child maltreatment and attachment theory*. In D. Cicchetti & V. Carlson (Eds.), *Child maltreatment: Theory and research on the causes and consequences of child abuse and neglect* (p. 432–

463). Cambridge University Press.
<https://doi.org/10.1017/CBO9780511665707.015>.

Cross, M. C., & Papadopoulos, L. (2001). *Becoming a therapist: A manual for personal and professional development*. Hove: Brunner-Routledge.

Crotty, M. (1998). *The foundations of social research: Meaning and perspective in the research process*. London: SAGE.

Cuthriell, K. (2014). *The Snowball Effect: How to Build Positive Momentum in your Life*. Bloomington, Author House.

D'Avanzato, C., Joormann, J., Siemer, M., & Gotlib, I. H. (2013). Emotion regulation in depression and anxiety: Examining diagnostic specificity and stability of strategy use. *Cognitive Therapy and Research*, 37, 968–980. doi:10.1007/s10608-013-9537-0.

Daloz, L.A., (1986). *Effective teaching and learning: realising the transformational power of adult learning experiences*. San Francisco, Jossey Boss.

D'Andrea, M., Daniels, J., & Heck, R. (1991). Evaluating the impact of multicultural counseling training. *Journal of Counseling & Development*, 70(1), 143–150.

Davidson, R., Kabat-Zinn, J., Schumacher, J., Rosenkranz, M., Muller, D., Santorelli, S., Urbanowski, F., ... Sheridan, J. (2003). Alterations in brain and immune function produced by mindfulness meditation. *Psychosomatic Medicine* 2003, 65:564-570.

Davies, L. & Collings, S. (2008) 'Emotional knowledge for child welfare practice: rediscovering our roots', *Smith College Studies in Social Work*, vol. 78, no. 1, pp. 7–26.

Davies, M. B. (2007). *Doing a successful research project: Using qualitative or quantitative methods*. New York: Palgrave Macmillan.

Davys, A., & Beddoe, L., (2010) *Best Practice in Professional Supervision*, London: Jessica Kingsley Publishers.

- Dawson, D., & Moghaddam, N. (2016). *Formulation in Action: Applying Psychological Theory to Clinical Practice*. Warsaw, Poland De Gruyter: Open Poland. <https://doi.org/10.1515/9783110471014>.
- DeJonckheere, M., & Vaughn, L. M., (2019). Semistructured interviewing in primary care research: a balance of relationship and rigour. *Family Medicine and Community Health*. 7, e000057.
- Dennison, S. T., & Secor, J. N. (2005). *A multiple family group therapy program for at risk adolescents and their families*. Springfield, Illinois: Development. Upper Saddle River, NJ: Pearson Education.
- Denscombe, M. (2014). *The Good Research Guide: For small-scale social research projects*. 5th ed., Maidenhead, Open University Press.
- Denzin, N. & Giardina, M. D. (2016). *Qualitative inquiry in the public sphere*. New York. Routledge.
- Denzin, N. K. (2017). *The research act: a theoretical introduction to sociological methods*. Chicago, Aldine Pub. Co.
- Denzin, N. K., & In Lincoln, Y. S. (2017). 5th Ed. *The SAGE handbook of qualitative research*. SAGE Publications, Inc.
- Denzin, N. K., & Lincoln, Y. S. (2000). *The handbook of qualitative research*. London : Sage.
- Dewane, C. J. (2006). Use of self: A primer revisited *Clinical Social Work Journal*, 34, 4, 543-558.
- Dewey, J. (1933/1988). *How we think: A restatement of the relation of reflective thinking to the educative process*. Boston, Mass: D.C. Heath.
- Dewey, J.,(1938/2015) *Experience and education*. New York Free Press.
- Diener, E., & Crandall, R. (1978). *Ethics in social and behavioral research*. Chicago, Ill, University of Chicago Press.

- Dietz, C. P. D., & Thompson, J. P. D. (2004). Rethinking Boundaries. *Journal of Progressive Human Services, 15*, 2, 1-24.
- Dockar-Drysdale (1965). *The problems of role acceptance in Therapy in Child Care*. Collected Papers. Longman Group Limited: London.
- Dockar-Drysdale, B. (1993). *Therapy and consultation in child care*. London: Free Association Books.
- Dockar-Drysdale, B.,(1990). *The provision of primary experience: Winnicottian work with children and adolescents*. London: Free Association Books.
- Doel, M., Sawdon, C., & Morrison, D. (2002). *Learning, practice and assessment: Signposting the portfolio*. London: Jessica Kingsley.
- Donati, M., & Watts, M. (2005). Personal development in counsellor training: Towards a clarification of inter-related concepts. *British Journal of Guidance & Counselling, 33*(4), 475-484.
- Downie, C., Basford, P., (1998). *Teaching and assessing in clinical practice 2nd ed*. London: University of Greenwich.
- Dryden, W. & Feltham, C. (1993). *Developing Counsellor Training*. London: Sage..
- Dryden, W., & Feltham, C. (1995). *Counselling and psychotherapy: A consumer's guide*. London: Sheldon.
- Dunne, C. (2002) *Carl Jung: Wounded healer of the soul: An illustrated biography*. Bloomsbury Publishing.
- Dustin, D. (2006). Skills and knowledge needed to practise as a care manager. *Journal of Social Work, 6*(3), 293–313.
- Duval, S. and Wicklund, R. (1972). *A theory of objective self-awareness*. United States: Academic Press.
- Duval, T. S., & Silvia, P. J. (2001). *Self-Awareness & Causal Attribution: A Dual Systems Theory*. Boston, MA: Springer US.

- Dvoráková. K, Kishida. M, Li. J, Elavsky. S, Broderick. P, Agrusti. M, Greenberg. M (2017) Promoting Healthy Transition to College through Mindfulness Training with First- Year College Students. *Journal of American College Health*, Vol. 65, Issue 4, p259.
- Egan, G. (2014). *The skilled helper: A problem-management and opportunity-development approach to helping*. Belmont, Calif: Brooks/Cole, Cengage Learning.
- Eller, J. (2004). *Effective Group Facilitation in Education: How to Energize Meetings and Manage Difficult Groups*. Thousand Oaks, Calif: Corwin Press.
- Elliott, R., Bohart, A. C., Watson, J. C., & Murphy, D. (2018). Therapist Empathy and Client Outcome: An Updated Meta-Analysis. *Psychotherapy*, 55, 4, 399-410.
- Ellis, A. E., Simiola, V., Brown, L., Courtois, C., Cook. J. M. (2018). The role of evidence-based therapy relationships on treatment outcome for adults with trauma: A systematic review. *Journal of Trauma & Dissociation*, 19, 2, 185-213. doi:10.1080/15299732.2017.132977.
- Endendijk, J. J., Groeneveld, M. G., Van Berkel, S. R., Hallers-Haalboom, E. T., Mesman, J., & Bakermans-Kranenburg, M. J. (2013). Gender stereotypes in the family context: Mothers, fathers, and siblings. *Sex Roles*, 68, 577–590. <https://doi.org/10.1007/s11199-013-0265-4>.
- Eruat, M., (2010). In Billett, S. (2010). *Learning Through Practice: Models, Traditions, Orientations and Approaches*. New York : Springer.
- Eskridge, T., Ohrt, J., Reysen, R. & Young, T. (2013). Personal Growth Groups: Measuring Outcome and Evaluating Impact. *Journal for Specialists in Group Work*, 38, 1, 52-67.
- ESRC, (2010). *Framework for Research Ethics (FRE)*, 2010. Updated September 2012. Available at: <https://esrc.ukri.org/files/funding/guidance-for-applicants/esrc-framework-for-research-ethics-2010/>.

- Estrada, A. U., Durlak, J. A., & Juarez, S. C. (2002). Developing Multicultural Counseling Competencies in Undergraduate Students. *Journal of Multicultural Counseling and Development*. 30, 110-123.
- Evans, N. J., Forney, D. S., Guido, F. M., Patton, L. D., & Renn, K. A. (2010). *Student Development in College: Theory, Research, and Practice*. New York, NY: John Wiley & Sons.
- Eyler, J., & Giles, D. E., Jr. (1999). *Where's the learning in service-learning?* San Francisco, CA: Jossey-Bass.
- Eyler, J., et al. (1996). *A Practitioner's Guide to Reflection in Service-Learning: Student Voices and Reflections*. (Nashville TN, Vanderbilt University).
- Fahlberg, V. (1981). Attachment and separation. [London], British Agencies for Adoption & Fostering.
- Fahlberg, V. (1988). *Fitting the pieces together: Attachment and separation : child development : helping children when they must move : the child in placement: common behavioural problems*. London: British Agencies for Adoption & Fostering.
- Fahy, A. (2007). The Unbearable Fatigue of Compassion: Notes from a Substance Abuse Counselor Who Dreams of Working at Starbuck's. *Clinical Social Work Journal*, 35(3), pp.199-205.
- Farrelly, T. & C. O'Doherty (2005). The Health and Social Care Professionals Bill (2004) – implications and opportunities for the social professions in Ireland'. *Administration* 53(1) pp. 80-92.
- Farrington, A. (1993). Intuition and expert clinical practice in nursing. *British Journal Of Nursing*, 2(4). 224-228.
- Felitti, V.J., Anda, R.F., Nordenberg, D.F., Williamson, D.F., Spitz, A.M., Edwards, V. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The Adverse Childhood Experiences (ACE) Study. *American Journal of Preventative Medicine*, 14(4), 245-258.

- Feltham, C. (2000). *What is counselling ?*. S. I.: Sage.
- Feltham, C., & Dryden, W. (1993). *Dictionary of counselling*. London: Whurr Publishers.
- Festinger, L. (1954). A theory of social comparison processes. *Human Relations*, 7, 117-140.
- Figley, C. R. (2002). *Treating compassion fatigue*. New York : Routledge, Taylor and Francis Group.
- Filep, C. V., Turner, S., Eidse, N., Thompson-Fawcett, M., & Fitzimmons, S. (2018). Advancing rigour in solicited diary research. *Qualitative Research*. 18, 451-470.
- Flanagan, N., & Wilson, E. (2018). What makes a good placement? Findings of a social work student-to-student research study. *Social Work Education*, 37, 5, 565-580.
- Flick, U. (2018). *An Introduction to Qualitative Research*, 6th ed., London: Sage.
- Flick, U., Kardorff, E. V., & Steinke, I. (2004). *A companion to qualitative research*. London, Sage.
- Flores, P. J. (2017). Attachment theory and group psychotherapy. *International Journal of Group Psychotherapy*, 67, S50-S59.
- Flyvbjerg, B. (2006). Five Misunderstandings About Case-Study Research. *Qualitative Inquiry*, 12, 2, 219-245.
- Fook, J (2010). *Beyond reflective practice: reworking the 'critical' in critical reflection*. In: Bradbury, Helen , Frost, Nick , Kilminster, Sue and Zukas, Miriam, (eds.) *Beyond reflective practice: new approaches to professional lifelong learning*. Abingdon, U.K. : Routledge. pp. 37-51. ISBN 9780415467926.
- Fook, J. (2002). *Social Work: Critical Theory and Practice*. London: Sage.
- Fook, J. (2002). Theorizing from practice: Towards an inclusive approach to social work. *Qualitative. Social Work*, 1(1), 79-95.

- Fook, J. (2004). Some considerations on the potential contributions on intercultural social work. *Social Work and Society*, 2, .
- Fook, J. and Gardner, F., (2007). *Practicing critical reflection: a resource handbook*. Maidenhead: Open University Press.
- Fook, J., (2002). *Social work: critical theory and practice*. London: Sage.
- Fook, J., and Gardner, F., (2013). *Critical Reflection in Context Applications in Health and Social Care* (London and New York: Routledge).
- Fook, J., Collington, V., & Ross, F. (2015). *Researching Critical Reflection: Multidisciplinary Perspectives*. Florence: Taylor and Francis.
- Ford, K. And Jones, A. (1987). *Student Supervision: practical Social Work*. Hound Mills, Basingstoke: Macmillan Press.
- Forsyth, D. R. (2000). *Group Dynamics Vol. 4, no. 1 : theory, research, and practice*. Washington, D.C. : Educational Pub. Foundation.
- Forsyth, D. R. (2005). *Group Dynamics* (4th ed.). Belmont, CA: Wadsworth/Thompson.
- Fraenkel, J. R., Wallen, N. E., & Hyun, H. H. (2015). *How to design and evaluate research in education*. NY : McGraw-Hill Education.
- Frankl, V. E. (1992). *Man's search for meaning*. Boston, Mass. Beacon Press.
- Freidson, E. (1984). The changing nature of professional control. *Annual Review of Sociology* 10, 1-20.
- Freidson, E. (1991). *Nourishing professionalism*. In E.D. Pellegrino, R. M. Veatch, and J. P. Langan (eds), *Ethics, Trust, and the Professions: Philosophical and Cultural Aspects* (Washington: Georgetown University Press), pp. 193-215.
- Freire, P. (1971). *Pedagogy of the oppressed*. New York : Herder and Herder.
- Freire, P. (1998). *Teachers as cultural workers: Letters to those who dare teach*. Boulder, Colo: Westview Press.

- Freud, S. (1915). *The unconscious*. SE, 14: 159-204.
- Frey, N., Fisher, D., & Everlove, S. (2009). *Productive group work: How to engage students, build teamwork, and promote understanding*. Alexandria, Va: ASCD.
- Froggett, L., Ramvi, E., & Davies, L. (2015). Thinking from experience in psychosocial practice: reclaiming and teaching 'use of self'. *Journal of Social Work Practice*, 29, 2, 133-150.
- Frost, N. (2011). *Qualitative research methods in psychology*. Maidenhead, Open Univ. Press.
- Furedi, F. (2005). *The Politics of Fear*. London: Continuum.
- Furedi, F., & Bristow, J. (2008). *Licensed to hug: How Child Protection Policies are Poisoning the Relationship between the Generations and Damaging the Voluntary sector*. London: Civitas.
- Furman, R., Rowan, D., & Bender, K. (2009). *An experiential approach to group work*. Chicago, IL: Lyceum Books.
- Gallagher, C., and O'Toole, J., (1999). Towards a sociological understanding of social care work in Ireland'. *Irish Journal of Social Work Research* 2(1) pp. 69-86.
- Galletta, A. (2013). *Mastering the semi-structured interview and beyond: From research design to analysis and publication*. New York: NYU Press.
<https://doi.org/10.18574/nyu/9780814732939.001.0001>.
- Galletta, A., & Cross, W. E. (2013). *Mastering the Semi-Structured Interview and Beyond: From Research Design to Analysis and Publication*. New York University Press.
- Gardner, F. (2014). *Being critically reflective: Engaging in holistic practice*. Houndmills, Basingstoke, Hampshire: Palgrave Macmillan.
- Gardner, H. (1993). *Frames of Mind. Tenth Anniversary Edition*. New York: Basic Books.

- Gardner, H., Csikszentmihalyi, M., & Damon, W. (2008). *Good work: When excellence and ethics meet*. New York: Basic Books.
- Garfat, T. (2012). *A Child and Youth Care Approach to Working with Families*. Taylor & Francis.
- Garfat, T., McElwee, N., and Charles, G. (2005). "Self in Social Care" in Share, P. and McElwee, N., (Eds.). *Applied Social Care: An Introduction for Irish Students*. Dublin: Gill and Macmillan.
- Garvin, D. C. (2016). *Group Work Research*. New York: Oxford University Press.
- Gavriel, J. (2015) 'Teaching tips for small-group facilitation' *Education for Primary Care* 26: 102-12. Radcliffe Publishing Limited.
- Gentry, J., W. (1990). *Guide to business gaming and experiential learning*. London: Kogan Page.
- Gerber, M. R. (2019). *Trauma-informed healthcare approaches: A guide for primary care*. Cham, Switzerland : Springer.
- Gergan, K., (1999). *An invitation to Social Construction*. Thousand Oaks. CA. Sage Publications.
- Germer, C. K., & Neff, K. (2019). *Teaching the mindful self-compassion program: A guide for professionals*. New York The Guilford Press.
- Gibbs, G. (1988). *Learning by doing: a guide to teaching and learning methods*. Oxford: Further Education Unit, Oxford Polytechnic.
- Gibbs, G. (1995). *Assessing student centred courses*. Oxford, UK: Oxford Centre for Staff Learning and Development.
- Giddens, A. (2009). *Introduction to sociology*. New York: W.W. Norton.
- Giddens, A., & Pierson, C. (1998). *Conversation with Anthony Giddens: making sense of modernity*. Cambridge, Polity Press.
- Giddens, A., & Sutton, P. W. (2017). *Sociology*. Cambridge, UK : Polity.

- Gilbert, N. (2012). A comparative study of child welfare systems: Abstract orientations and concrete results. *Child and Youth Services Review*, 34, pp. 532–536.
- Gillath, O., & Shaver, P. R. (2007). Effects of attachment style and relationship context on selection among relational strategies. *Journal of Research in Personality*, 41, 4, 968-976.
- Giluk, T. L. (2009). Mindfulness, Big Five personality, and affect: A meta-analysis. *Personality and Individual Differences*, 47, 8, 805-811.
- Ginot, E. (2015). *The neuropsychology of the unconscious: Integrating brain and mind in psychotherapy*. New York : W.W. Norton & Company.
- Giroux, H. A. (1988). *Schooling and the struggle for public life: Critical pedagogy in the modern age*, (Minneapolis, MN, University of Minnesota Press).
- Glassman, W. E., & Hadad, M. (2013). *Approaches to psychology*. Maidenhead, Berkshire : McGraw-Hill.
- Gloster-Smith, J. & Rose, C. (2004) Be Here Now... Being Present as Facilitator, CPJ: *Counselling & Psychotherapy Journal*, Vol. 15, Issue 3, p. 44-46.
- Glumbikova, K., (2020) The self of social workers in practice of field social work with families in the Czech Republic, *Journal of Social Work Practice*, 34:2, 139-150, DOI:10.1080/02650533.2019.1665000.
- Gockel, A., Cain, T., Malove, S., & James, S. (2013). Mindfulness as clinical training: Student perspectives on the utility of mindfulness training in fostering clinical intervention skills. *Journal of Religion and Spirituality in Social Work: Social Thought*, 32(1), 36–59. doi:10.1080/15426432. 2013.749146.
- Goering, P., Boydell, K. M., & Pignatiello, A. (2008). The Relevance of Qualitative Research for Clinical Programs in Psychiatry. *The Canadian Journal of Psychiatry*. 53, 145-151.
- Goffman, E. (1959). *The presentation of self in everyday life*. Garden City, NY: Doubleday & Co.

- Goffman, E. (1990). *Stigma: Notes on the management of spoiled identity*. New York: Penguin Books.
- Goleman, D. (1995). *Working with emotional intelligence*. London: Bloomsburg.
- Good D.J.; Lyddy C.J.; Glomb T.M.; Duffy M.K.; Bono J.E.; Brown K.W.; Baer R.A.; Brewer J.A.; Lazar S.W. (2016). Contemplating Mindfulness at Work: An Integrative Review. *Journal of Management*, 42, 1, 114-142.
- Government of Ireland (1991) *The Child Care Act, 1991*. Dublin: Government Publications Stationery Office.
- Government of Ireland (2005) *Health and Social Care Professionals Act*. The Stationery Office, Dublin.
- Goyal, M., Singh, E. S., Sibinga, E., Gould, N., Rowland-Seymour, A., Sharma, R., ... Haythornthwaite, J. A. (2014). Meditation programs for psychological stress and well-being: A systematic review and meta-analysis. *JAMA Internal Medicine*, 174, 357–368. doi:10.1001/jamainternmed.2013.13018.
- Graham, G. and Megarry, B. (2005). The Social Care Portfolio: An Aid to Integrated Learning and Reflection. *Social Work Education*, 24 (7), 769-780.
- Grant, L., Kinman, G. and Baker, S., (2013). Developing An "Emotional Curriculum" For Social Workers; Perceptions Of Social Work Lecturers | Advance HE. [online] Available at: <<https://www.advance-he.ac.uk/knowledge-hub/developing-emotional-curriculum-social-workers-perceptions-social-work-lecturers>> .
- Green, A., (2017). "The Role of Self-Awareness and Reflection in Social Care Practice," *Journal of Social Care: Vol. 1*, Article 3. doi:10.21427/D7614X Available at: <https://arrow.tudublin.ie/jsoc/vol1/iss1/3>.
- Greenson, R. R. (1967). *The technique and practice of psychoanalysis. (The technique and practice of psychoanalysis*. New York: International Universities Press.

- Griffiths, A., Royse, D., Murphy, A., & Starks, S. (2019). Self-Care Practice in Social Work Education: A Systematic Review of Interventions. *Journal of Social Work Education, 55, 1, 102-114.*
- Guba E. G. & Lincoln Y. S. (2000). *Fourth generation evaluation ([12. print])*. Sage Publ.
- Guest, G., Namey, E.E. & Mitchell, M.L. (2014). *Collecting Qualitative Data: A Field Manual for Applied Research*. Thousand Oaks: Sage.
- Hafford-Letchfield, T., Leonard, K., Begum, I. & Chick, N. F. (2008). *Leadership and Management in Social Care*. London: Sage Publications.
- Hall, E., Hall, C., Harris, B., Hay, D., Biddulph, M., & Duffy, T. (1999). An evaluation of the long-term outcomes of small-group work for counsellor development. *British Journal of Guidance and Counselling, 27, 1, 99-112.*
- Hallstedt, P. & M. Högström (2005b). *The recontextualisation of social pedagogy: A study of three curricula in the Netherlands, Norway and Ireland*. Published PhD thesis. Malmö: University of Malmö.
- Halsey, A.,H., Lauder, H., Brown, P, Wells, A., S. (2001). *Education: Culture, economy, and society*. Oxford University Press.
- Hamilton, D. L., & Trolie, T. K. (1986). *Stereotypes and stereotyping: An overview of the cognitive approach*. In J. F. Dovidio & S. L. Gaertner (Eds.), *Prejudice, discrimination, and racism* (p. 127–163). Academic Press.
- Hamilton, D. M., & Jackson, M. H. (1998). Spiritual development: Paths and processes. *Journal of Instructional Psychology, 25, 262-2.*
- Hammick, M., Freeth, D.S., Copperman, J. and Goodsman, D. (2009). *Being interprofessional*. Cambridge UK, Polity.
- Hannafin, M. J., Hill, J. R. & Land, S. M. (1997). Student-centred learning and interactive multimedia: status, issues and implications, *Contemporary Education, 68*, pp. 94–97.

- Hansen, J., T. (1999). "A Review and Critical Analysis of Humanistic Approaches to Treating Disturbed Clients", *Journal Of Humanistic Counseling, Education & Development*, 38, 1, p. 29, SocINDEX with Full Text, EBSCOhost.
- Hargie, O. J. (2011). *Skilled Interpersonal Communication: Research, Theory and Practice*. London, Routledge.
- Hargreaves, A. (2003). *Teaching in the Knowledge Society: Education in the Age of Insecurity*. Teachers College Press, New York.
- Harris, A. (2014). *Distributed Leadership Matters, Perspectives, Practicalities, and Potential*. London: Sage LTD.
- Harris, M., & Fallot, R. D. (2001). *Using trauma theory to design service systems*. San Francisco: Jossey-Bass.
- Harrison, P., (2006). *Managing social care: A guide for new managers*. Lyme Regis, Dorset: Russell House Publishing.
- Hartwell-Walker, M. (2015). *Unlocking the secrets of self-esteem: A guide to building confidence and connection one step at a time*. Oakland, CA : New Harbinger Publications.
- Hawkins, P., McMahon, A., Ryde, J., Shohet, R., & Wilmot, J. (2020). *Supervision in the helping professions*. Maidenhead : Open University Press.
- Hay, D. P. (2019). Freud on the yellow brick road: When the unconscious meets the Wizard of Oz. *Psychodynamic Practice* 25 369-376. DOI:10.1080/14753634.2019.1596592.
- Hazan, C., & Shaver, P. (1987). Romantic love conceptualized as an attachment process. *Journal of Personality and Social Psychology*, 52, 3, 511-24.
- Healey, J. and Spencer, M. (2008). *Surviving your placement in health and social care*. Maidenhead, England: McGraw Hill/Open University Press.
- Health & Social Care Professionals Council (CORU), (2017, a). "Social Care Workers Registration Board –Standards of Proficiency for Social Care Workers", [Online].

- Health & Social Care Professionals Council (CORU), (2017, b). "*Social Care Workers Registration Board – Criteria for Education and Training Programmes*", [Online].
- Health and Social Care Professionals Act, (2005).* [Online] Available from: www.irishstatutebook.ie/2005/en/act/pub/0027/.
- Heidegger, M. (2006). *Mindfulness*. New York: Continuum International Publishing Group.
- Heilman, D. C. & Clarke, D. (2016). *Transformative Learning Theory: Perspectives on Nelson Mandela and Application for U.S. Learners in South Africa*. In Tomlinson-Clarke, S. M., & Clarke, D. L. (2016). *Social Justice and Transformative Learning: Culture and Identity in the United States and South Africa*. Florence: Taylor and Francis.
- Heim, C., (2012.) Tutorial facilitation in the humanities based on the tenets of Carl Rogers. *Higher Education: the International Journal of Higher Education Research*, 63(3), pp.289-298.
- Henderson, P. (2009). *Supervisor training: Issues and approaches*. London: Karnac.
- Hennick, M. M., Hutter, I., & Bailey, A. (2020). *Qualitative research methods*. Los Angeles : Sage.
- Hepworth, D., Rooney, R. H., Rooney, G. D., Strom-Gottfried, K., & Larsen, J. (2009). *Direct Social Work Practice: Theory and Skills*. (8th ed). Wadsworth Publishing Co Inc.
- Heron, J. (1999). *The complete facilitator's handbook*. New York: Stylus Publishing.
- Hess, A. K. (1980). *Psychotherapy supervision: Theory, research and practice*. New York: J. Wiley.
- Hesterman, S. (2016). The digital handshake: A group contract for authentic elearning in higher education. *Journal of University Teaching and Learning Practice*, 13(3), 1-24.

- Heydt, M. J., & Sherman, N. E. (2005). Conscious use of self: Tuning the instrument of social work practice with cultural competence. *The Journal of Baccalaureate Social Work*, 10(2), 25–40.
- Hicks, L., Gibbs, I., Weatherly, H., Byford, S. (2009). Management, leadership and resources in children's homes: What influences outcomes in residential child-care settings? *The British Journal of Social Work*, 39 (5) (2009), pp. 828-845, 10.1093/bjsw/bcn013.
- Hicks, S. (2016). Theory and social work: A conceptual review of the literature. *International journal of social welfare*. 25: 399-414. doi:10.1111/ijsw.12215.
- Higgins, C. (2001). From reflective practice to practical wisdom: Three models of liberal teacher education. *Philosophy of Education*, 11(2), 92-99.
- Higgins, E. T. (1987). Self-discrepancy: A theory relating self and affect. *Psychological Review*, 94(3), 319–340.
- Higher Education Strategy Group (Ireland) (2011). *National Strategy for Higher Education to 2030. Report of the Strategy Group*. Dublin. Department of Education and Skills.
- Hill, C. L. M., & Updegraff, J. A. (2012). Mindfulness and its relationship to emotional regulation. *Emotion*, 12, 81–90. doi:10.1037/a0026355.
- Hodas, G. R. (2006) *Responding to childhood trauma: The promise and practice of trauma informed care*. Pennsylvania Office of Mental Health and Substance Abuse Services, Pennsylvania.
- Hodge, P., Wright, S., Barraket, J., Scott, M., Melville, R., & Richardson, S. (2011). Revisiting 'how we learn' in academia : practice-based learning exchanges in three Australian universities. *Studies in Higher Education*, 36, 2, 167-183.
- Hoidn, S., & Klemenčič, M. (2021). *The Routledge international handbook of student-centred learning and teaching in higher education*. New York, Routledge.
- Holroyd, J. (2015). *Self-Leadership and Personal Resilience in Health and Social Care*. London: Sage Publications Ltd.

- Holston, E. C., & Taylor, J. Y. (2016). Emotional Intelligence in Nursing Students—Describing Emotional Intelligence in the Last 2 Years of a BSN Program. *International Journal of Advances in Psychology*, 5, 0, 11.
- Holtz Deal, K., Bennett, S., Mohr, J., & Hwang, J. (2011). Effects of field instructor training on student competencies and the supervisory alliance. *Research on Social Work Practice*, 21(6), 712-726.
- Hooley, T., Marriott, J., & Wellens, J. (2013). *What is online research?: using the Internet for social science research*. London, Bloomsbury.
- Hopper, E. K., Bassuk, E. L., & Olivet, J. (2010). Shelter from the Storm: Trauma-Informed Care in Homelessness Services Settings~2009-08-20. *The Open Health Services and Policy Journal*, 3, 2, 80-100.
- Horton, G. E., Diaz, N., & Green, D. (2009). Mental Health Characteristics of Social Work Students: Implications for Social Work Education. *Social Work in Mental Health*. 7, 458-475.
- Howard, J. (2001). Principles Of Good Practice For Service-Learning Pedagogy. *Michigan Journal of Community Service Learning: Service-Learning Course Design Workbook*. University of Michigan: OCSL Press, pp. 16-19.
- Howe, D. (2011). *Attachment across the life course: a brief introduction*. Basingstoke, Palgrave Macmillan.
- Howe, K., & Gray, I. (2013). *Effective supervision in social work*. Sage/Learning Matters.
- Howlett, B., Rogo, E. J., & Shelton, T. G. (2021). *Evidence based practice for Health professionals*. Burlington, MA : Jones & Bartlett Learning Burlington, MA Jones et Bartlett Learning.
- Hoyle, E. & John, P.D. (1995). *Professional Knowledge and Professional Practice*. London: Cassell.

- Hoyle, E. (1980) *Professionalization and deprofessionalization in education*. In E. Hoyle & Megarry, J (Eds) *World Yearbook of Education 1980*, pp. 42-57. London: Kogan Page.
- <https://doi.org/10.1007/s42438-020-00110-x>
- Hughes, J. N., & Youngson, S. (2009). *Personal development and clinical psychology*. Chichester, West Sussex: BPS Blackwell.
- Huhtinen-Hildén, L., & Pitt, J. (2018). *Taking a Learner-Centred Approach to Music Education: Pedagogical Pathways*. London Routledge, Taylor and Francis Group.
- Hunt, C. & West, L. (2011). Using Psychodynamic Ideas in Teaching and Research. *Cliopsy*, 6, 2, 77-85.
- Hunt, C. (1998). Learning from Lerner: reflections on facilitating reflective practice. *Journal of Further and Higher Education*, 22, 1, 25-31.
- Hunter, D., Bailey, A. & Taylor, B., (1996). *The Facilitation of Groups*. 2nd ed. New Zealand: Gower Publishing Limited.
- Hutchison, E., D., Charlesworth, L., W., & Cummings, C., (2019). *Dimensions of human behavior: Person and environment*. Los Angeles : SAGE.
- Hutt, C. H., Scott, J., & King, M. (1983). A phenomenological study of supervisees' positive and negative experiences in supervision. *Psychotherapy: Theory, Research & Practice*, 20(1), 118.
- Hvidtfeldt, R. (2018). *The Structure of Interdisciplinary Science*. New York, Palgrave Macmillan.
- Hyde, R., & Edwards, J.-A. (2014). *Mentoring mathematics teachers: Supporting and inspiring pre-service and newly qualified teachers*. London: Routledge.
- IASCE, (2009) *Practice Placement Manual, 2nd Ed.*, Big Fish Press Sligo, Ireland [ISBN: 9781906945015].

- Ieva, K. P., Ohrt, J. H., Swank, J. M., & Young, T. (2009). The impact of experiential groups on master students' counselor and personal development: A qualitative investigation. *The Journal for Specialists in Group Work*, 34(4), 351-368.
- Inspectorate Evaluation Studies, (2010). *Department of Education and Skills*. Available: https://www.education.ie/en/Publications/Inspection-ReportsPublications/Evaluation-ReportsGuidelines/insp_evaluation_youth_reach_2010.pdf.
- Ireland. (1970). *Reformatory and Industrial Schools Systems: Report, 1970*. Dublin: Ireland Dept. of Education.
- Ireland's National Skills Strategy (2025). Department of Education. Available: https://www.education.ie/en/publications/policy-reports/pub_national_skills_strategy_2025.pdfnd skills.
- Irving, J., & Williams, D. (1999) Personal growth and personal development: Concepts clarified. *British Journal of Guidance & Counselling*, 27:4, 517-526, DOI: 10.1080/03069889908256287.
- Jabr, F. (2012). Self-Awareness with a Simple Brain. *Scientific American Mind*, 23, 5, 28-29.
- Janesick, V. J. (1999). A Journal About Journal Writing as a Qualitative Research Technique: History, Issues, and Reflections. *Qualitative Inquiry*, 5, 4, 505-524.
- Janssens, K. A. M., Bos, E. H., Rosmalen, J. G. M., Wichers, M. C. & Riese. (2018). A qualitative approach to guide choices for designing a diary study. *Bmc Medical Research Methodology*, 18, 1, 140.
- Jarvis P (1992) Reflective practice and nursing. *Nurse Education Today* 12: 174-81.
- Jarvis, P. (2006). *The theory and practice of teaching*. London: Routledge.
- Jasper, M. (2003). *Beginning Reflective Practice*. Cheltenham: Nelson Thornes.
- Johns, C. (1995). Framing learning through reflection within Carper's fundamental ways of knowing in nursing. *Journal of Advanced Nursing* 22: 226-34.

- Johns, C. (1995). The value of reflective practice for nursing. *Journal of Clinical Nursing*, 4, 1, 23-30.
- Johns, C. (2000a). *Becoming a reflective practitioner*. Oxford: Blackwell Science.
- Johns, C. (2006). *Engaging Reflection in Practice- a narrative approach*. Oxford.
- Johns, C. (2017). *Becoming a Reflective Practitioner, 5th Edition*. Wiley.
- Johns, H. (1996). *Personal Development in Counsellor Training*. London, VA: Cassell.
- Johns, H. (2012). *Personal development in counsellor training*. Los Angeles, Calif: SAGE.
- Johnson, B. T., & Acabchuk, R. L. (2018). What are the keys to a longer, happier life? Answers from five decades of health psychology research. *Social Science & Medicine*, 196, 218-226.
- Joint Committee on Social Care Professionals, (2002). *Final Report of Joint Committee on Social Care Professionals*, Dublin: Department of Social and Family Affairs, available @ <http://www.lenus.ie/hse/handle/10147/46110>. [Accessed 20/1/20].
- Jones, M., L., (2020). *A Mastering Facilitation: A Guide for guide assisting teams achieve powerful results*. S.I.: CRC PRESS.
- Jordan, J. (2010). *The power of connection: Recent developments in relational-cultural theory*. New York, NY: Routledge
- Jordan, J. V., Dooley, C. (2000). *Relational practice in action: A group manual*. Wellesley, MA: Stone Center, Wellesley College..
- Joyce E., Miehl, D., DuBois C., & Garran, A., (2011). The Developmental Model of Supervision as Reflected in the Experiences of Field Supervisors and Graduate Students. *Journal of Teaching in Social Work*, 31, 3, 250-264.
- Joyce, B., Weil, M. & Calhoun, E. (2004). *Models of Teaching (7th. ed.)*. Boston: Allyn & Bacon.

- Jung, C. G. (1951). *Psychology of the unconscious: A study of the transformations and symbolisms of the libido; a contribution to the history of the evolution of thought*. London: Routledge & Kegan Paul.
- Kabat-Zinn, J. (2005). *Coming to our senses: healing ourselves and the world through mindfulness*. New York, NY: Hyperion.
- Kadushin, A., Harkness, D., (2002). *Supervision in social work, 4th edition*, New York: Columbia University Press.
- Kahn, M. (2002). *Between therapist and client: The new relationship*. Enskede: TPB.
- Kane, S. (2006). Group dynamics and the role of the facilitator: Part 2. Facilitator competencies in group psychotherapy. <https://www.scottishirishhealthcare.com/index.cgi?article+156>.
- Karm, M., (2010). Reflection tasks in pedagogical training courses. *International journal for academic development*, 15 (3), 203–214.
- Kattan, L. J., (2009). *Psychology Workbook on Higher Self - esteem*. North America: Trafford Publishing.
- Kay, N. S. (2018). *Self-Awareness in Personal Transformation*. In: Neal J. (eds) *Handbook of Personal and Organizational Transformation*. Springer, Cham. https://doi.org/10.1007/978-3-319-29587-9_22-2.
- Keeling, J., In Chapman, H. M., & In Williams, J. (2013). *How to write well: A guide for health and social care students*. Maidenhead, England : Open University Press/McGraw-Hill Education.
- Keeton, M. T., & Tate, P. J. (1978). *Learning by experience: What, why, how* : edited by Morris T. Keeton and Pamela J. Tate. San Francisco, Calif: Jossey-Bass.
- Kelchtermans, G. (2009) "Who I am in how I teach is the message: self-understanding, vulnerability and reflection. *Teachers and Teaching*, 15, 2, 257-272.
- Kelly G. A. (1955). *The psychology of personal constructs*. Norton, New York.

- Keynes, J. M. (2018). *The general theory of employment, interest, and money*. Cham, Switzerland Palgrave Macmillan.
- Kim, E. (2012). An Alternative Theoretical Model: Examining Psychosocial Identity Development of International Students in the United States. *College Student Journal*, 46, 1, 99-113.
- Kimmel, A. J. (2007). *Ethics and values in applied social research*. London, Sage.
- King, N., & Horrocks, C. (2016). *Interviews in qualitative research*. Los Angeles, Calif.: Sage.
- Kingsley, C. W., & McPherson, K. (1995). *Enriching the curriculum through service learning*. Alexandria, VA: Association for Supervision and Curriculum Development.
- Kirkwood, J. (2019). The case for personal development. *Perspectives: Policy and Practice in Higher Education* 23:4, 117-121. 10.1080/13603108.2018.1555192.
- Kitchenham, A. (2008) "The Evolution of John Mezirow's Transformative Learning Theory", *Journal of Transformative Education*, 6, 104-123.
- Kivlighan III, M., Adams, M.C., Obrecht, A., Kim, C., Ward, B., & Latino, C.,A., (2019). Group Therapy Trainees' Social Learning and Interpersonal Awareness: The Role of Cohesion in Training Groups, *The Journal for Specialists in Group Work*, 44:1, 62-76, DOI: 10.1080/01933922.2018.1561777.
- Kivlighan, D. M., Jr., & Tibbits, B. M. (2012). Silence is mean and other misconceptions of group counseling trainees: Identifying errors of commission and omission in trainees' knowledge structures. *Group Dynamics: Theory, Research, and Practice*, 16, 14–34. doi:10.1037/a0026558.
- Kiweewa, J., Gilbride, D., Luke, M., & Seward, D. (2013). Endorsement of Growth Factors in Experiential Training Groups. *Journal for Specialists in Group Work*, 38, 1, 68-93.
- Klein, M. (1962). *Our adult world and its roots in infancy*. London: Tavistock.

Klenke, K.,(2016). *Qualitative research in the study of leadership*. United Kingdom : Emerald.

Knapman, J. & Morrison, T. (1999). *Making the Most Of Supervision In Health And Social Care; A self development manual for supervisees*. Brighton: Pavilion.

Knight, C. (2014). Teaching group work in the BSW generalist social work curriculum: Core content. *Social Work with Groups*, 37, 25–35.

Knott, C. & Scragg, T. (2016). *Reflective Practice in Social Work*. Sage Publications Ltd. 4th Edition.

Knowles, M. S. (1950). *Informal adult education: A guide for administrators, leaders, and teachers*. New York: Association Press.

Kohlstaedt, E. (2010). What is harmed by relationship can be healed by relationship: A developmental/relational approach to residential treatment for young children. *Scottish Journal for Residential Child Care*, 9(1), 44–53.

Koile, E. (1977). *Listening as a way of becoming*. Waco, Tex: Regency Books.

Kolb, D., A. (1984). *Experiential Learning: Experience as the Source of Learning and Development*, (New Jersey, Prentice Hall).

Konopka, G. (1971). *Social group work: A helping process*. Englewood Cliffs, N.J: Prentice-Hall. 2nd Ed.

Koprowska, J. (2010). *Communication and Interpersonal Skills in Social Work*. Great Britain: Learning Matters Ltd.

Kotera, Y. & Maughan, G. (2020). 'Mental health of Irish students: Self-criticism as a complete mediator in mental health attitudes and caregiver identity'. *Journal of Concurrent Disorders*, pp. 1-13.

Kubacki, K., & Rundle-Thiele, S. (2018). *Formative Research in Social Marketing: Innovative Methods to Gain Consumer Insights*. Springer Singapore.

Kurtz, A. (2020). *How to run reflective practice groups: A guide for healthcare professionals*. Abingdon, Oxon ; New York, NY : Routledge.

- Kwok, R. C.-W., Ma, J., & Vogel, D. R. (2003). Effects of Group Support Systems and Content Facilitation on Knowledge Acquisition. *Journal of Management Information Systems*, 19, 185-230.
- Laird, S. E. (2013). *Child protection: Managing conflict, hostility and aggression*. Bristol University Press, UK.
- Lalor, K., & In Share, P. (2013). *Applied social care: An introduction for students in Ireland*. Dublin : Gill & Macmillan.
- Land, R., & Gordon, G. (2013). *Enhancing quality in higher education : international perspectives*. London: Routledge.
- Land, R., Cousin, G., Meyer, J.H.F. and Davies, P. (2005). *Threshold concepts and troublesome knowledge (3): implications for course design and evaluation*, In: C. Rust (ed.), *Improving Student Learning - diversity and inclusivity*. Proceedings of the 12th Improving Student Learning Conference. Oxford: Oxford Centre for Staff and Learning Development (OCSLD), pp 53-64.
- Land, R., Meyer, J.H.F. & Flanagan, M. T. (2016). *Threshold Concepts in Practice*. Rotterdam, The Netherlands : Sense Publishers.
- Langer, E. J. (1989). *Mindfulness*. Cambridge, MA: Perseus Books.
- LaRocque, S. E. (2017). Group Work Education in Social Work: A Review of the Literature Reveals Possible Solutions. *Journal of Social Work Education*, 53, 2, 276-285.
- Larsen, P. D., & Lubkin, I. M. (2013). *Chronic illness: Impact and interventions*. Burlington, Mass: Jones & Bartlett Learning.
- Lau, M. A., Ogrodniczuk, J., Joyce, A. S., & Sochting, I. (2010). Bridging the practitioner-scientist gap in group psychotherapy research. *International Journal of Group Psychotherapy*, 60, 177–196.
- Lax, W. D (1996) "Narrative, Social Constructionism and Buddhism". In H. Rossen and K. T. Kuehlwein (eds). *Constructing Realities: Meaning making Perspectives for Psychotherapists*. San Francisco: Jossey-Bass.

- Lazarus R. S. (1966). *Psychological stress and the coping process*. McGraw-Hill, New York.
- Lea, S., Stephenson, D., & Troy, J. (2003). Higher Education Students' Attitudes to Student-centred Learning: Beyond 'educational bulimia'?. *Studies in Higher Education*, 28, 3, 321-334.
- Leary, M. R., & Tangney, J. P. (2014). *Handbook of self and identity*. New York : Guilford Press.
- Leavy, P. (2020). *The Oxford Handbook of Qualitative Research*. New York, NY : Oxford University Press.
- Lennie, C. (2007). The role of personal development groups in counsellor training: understanding factors contributing to self-awareness in the personal development group. *British Journal of Guidance & Counselling*, 35, 1, 115-129.
- Letherby, G., Scott, J., & Williams, M. (2013). *Objectivity and subjectivity in social research*. Los Angeles, Sage.
- Lewins, A. & Silver, C. (2014). *Using Software in Qualitative Research*. London : Sage Publications.
- Lindlof, T. R., & Taylor, B. C. (2017). *Qualitative communication research methods*. Los Angeles, Calif: SAGE.
- Lindsay, M. (2002). *Building a professional identity: The challenge for Residential Child and Youth Care*. In Knorth, E. J., Bergh, P. M., & Verheij, F. (2002). Professionalization and participation in child and youth care: challenging understandings in theory and practice. Aldershot: Ashgate.
- Lindsay, T., & Orton, S. (2014). *Groupwork practice in social work*. Thousand Oaks, California : SAGE Publications.
- Lishman, J. (2015). *Handbook for practice learning in social work and social care*. 3rd ed. Jessica Kingsley Publishers.
- LIT survey, (2014). *Social Care Document as of 17th December 2014.pdf*.

- Long, T., & Johnson, M. (2000). Rigour, reliability and validity in qualitative research. *Clinical Effectiveness in Nursing*, 4, 30-37.
- Lovat, T., Toomey, R., & Clement, N. (2010). *International Research Handbook on Values Education and Student Wellbeing*. Dordrecht: Springer Science+Business Media B.V.
- Loxley, A. (2010). *Chapter 2, Process and Products: Designing Research and Research Design*. In class lecture series for PhD students.
- Loxley, A., Seery, A., & Walsh, J., (2014). Investment in Education and the tests of time. *Irish Educational Studies*, 33:2, 173-191.
- Lub, V. (2019). Theory, social work methods and participation. *Journal of Social Work*, 19, 1, 3-19.
- Lucas, . U., Cox, P., Croudace, C., & Milford, P. (2004). 'Who writes this stuff?': students' perceptions of their skills development. *Teaching in Higher Education*, 9, 1, 55-68.
- Luft, J. (1984). *Group processes: An introduction. to group dynamics*. Palo Alto, Calif: Mayfield Publ.
- Lui, Y. J., & Yin, A. C. (2010). Accessing Personal Growth. *New Directions For Institution Research*, 111-121.
- Lyons, E., & In Coyle, A. (2021). *Analysing qualitative data in psychology*. Los Angeles : SAGE.
- Lyons. D. (2013). "Learn about your "self" before you work with others". In Share, P. and McElwee, N., (Eds.) *Applied Social Care An Introduction for Students in Ireland*. Dublin : Gill & Macmillan.
- MacGowan, M. J. (2012). A standards-based inventory of foundation competencies in social work with groups. *Research on Social Work Practice*, 22, 578–589. doi:10.1177/1049731512443288.

- Mackintosh, C., (1998). Reflection: a flawed strategy for the nursing profession. *Nurse Education Today*, 18, 7, 553-557.
- Maclean, S., & Harrison, R. (2015). *Theory and practice: A straightforward guide for social work students*. Lichfield: Kirwin Maclean Associates.
- Magen, R. H. & Mangiardi, E. (2005). *Groups and individual change*. In Wheelan, S. A. The handbook of group research and practice (pp. 351-362). SAGE Publications, Inc. doi: 10.4135/9781412990165.
- Magnuson, S., Wilcoxon, S. A., & Norem, K. (2000). A profile of lousy supervision: Experienced counselors' perspectives. *Counselor Education and Supervision*, 39(3), 189-203.
- Mahal, A. S. (2015). *Facilitator's and trainer's toolkit: Engage and energize participants for success in meetings, classes, and workshops*. Basking Ridge, NJ : Technics Publications, LLC.
- Mahon, L., & Leszcz, M. (2017). The interpersonal model of group psychotherapy. International. *Journal of Group Psychotherapy*, 60(2), 245-281.
- Manning, A., Cronin, P., Monaghan, A., Rawlings-Anderson, K. (2009). Supporting students in practice: an exploration of reflective groups as a means of support. *Nurse Education in Practice*, 9, (3), pp 176 – 183.
- Mantzoukas, S. (2009). *Reflection, knowledge and daily practice: Understanding practitioners' experiences in the medical wards*. VDM Verlag Dr. Müller
- Marks-Maran, D. J., & Rose, P. (1997). *Reconstructing nursing: Beyond art and science*. London: Bailliere-Tindall in association with the RCN.
- Markus, H. E., & Abernethy, A. D. (2001). Joining with resistance: Addressing reluctance to engage in group therapy training. *International Journal of Group Psychotherapy*, 5(2), 191 204.
- Markus, H., & Nurius, P. (1986). Possible selves. *American Psychologist*, 41, 9, 954-969.

- Martin, P. (2011). Celebrating the wounded healer. *Counselling Psychology Review British Psychological Society New Series*, 26, 1, 10-19.
- Maslow, A. H. (1943). A theory of human motivation. *Psychological Review*, 50(4), 370-96.
- Maslow, A. H. (1943). A theory of human motivation. *Psychological Review*, 50(4), 370-96.
- Maslow, A. H. (1954). *'Motivation and personality'*. New York: Harper and Row.
- Mason, C. (2012). Social work the 'art of relationship': parents' perspectives on an intensive family support project: Parents' perspectives on a family support project. *Child & Family Social Work*, 17, 3, 368-377. 1).
- Matthews, B., & Ross, L. (2014). *Research Methods*. Harlow, United Kingdom, Pearson Education, Limited.
- Mattinson, J. (1975). *The reflection process in casework supervision*. London: Institute of Marital Studies, the Tavistock Institute of Human Relations.
- Maughan, G. (2016) Commonalities Between Personal Development Modules and Social Care Practice in Ireland -*Journal of Teaching and Education (JTE)*, Vol. 5, No. 2- ISSN: 2156-6266.
- Maughan, G. (2017) An Exploration of the Value of Marte Meo Therapy in Establishing, Re-establishing and Supporting Attachment Relationships *The Children's Research Digest*. Vol 4, Issue 1. ISSN209-728X.
- Mazzetti, A., & Blenkinsopp, J. (2012). Evaluating a visual timeline methodology for appraisal and coping research. *Journal of occupational and organizational psychology*, 85, 649–655.
- McBride, P., (2017). *The Assertive Social Worker*. Routledge.
- McCabe, A., & O'Connor, U. (2014). Student-centred learning: the role and responsibility of the lecturer, *Teaching in Higher Education*, 19:4, 350-359, DOI:10.1080/13562517.2013.860111.

- McCabe, A., & O'Connor, U., (2014). Student-centred learning: the role and responsibility of the lecturer, *Teaching in Higher Education*, 19:4, 350-359, DOI:10.1080/13562517.2013.860111.
- McCann, D. (2000). *From Here to Eternity and Back Again: Developing a Supervisory Relationship with Training Family Therapists*. In Barnes, G., Down, G., and McCann, D., (eds) *Systemic Supervision: A Portable Guide for Supervision Training*. London: Jessica Kingsley Publishers.
- McGrath, B., (2010). 'Everything is different here ...': mobilizing capabilities through inclusive education practices and relationships. *International Journal of Inclusive Education*, 10:6, 595-614, DOI: 10.1080/13603110500271425.
- McGregor, C. & Quin, S. (2015). *Revisiting Our History Post 'Celtic-tiger'*. In Christie, A., Featherstone, B., Quin, S and Walsh, T (eds) *Social Work Ireland Changes and Continuities*. Palgrave.
- McGregor, C. (2019). A Paradigm Framework for Social Work Theory for Early 21st Century Practice. *British Journal of Social Work*, 49, 8, 2112-2129.
- McKellar, A., & Kendrick, A., (2013). Key working and the quality of relationships in secure accommodation. *Scottish Journal of Residential Child Care 2013 – Vol.12*, No.1.
- McLeod, G. A., Vaughan, B., Carey, I., Shannon, T., & Winn, E. (2020). Pre-professional reflective practice: Strategies, perspectives and experiences. *International Journal of Osteopathic Medicine*, 35, 50-56.
- McLeod, J., & McLeod, J. (2014). *Personal and professional development for counsellors, psychotherapists and mental health practitioners*. Berkshire, England: Open University Press.
- McMahon, A., & Rodillas, R. R. (2020). Personal development groups during psychotherapy training: Irish students' expectations and experiences of vulnerability, safety and growth. *Counselling Psychology Quarterly*, 33, 2, 163-186.

- McSweeney, F & Williams, D., (2019) Social care graduates' judgements of their readiness and preparedness for practice. *Social Work Education*, 38:3, 359-376, DOI:10.1080/02615479.2018.1521792.
- McSweeney, F. (2014). *Considerations in Researching How Practice Teachers View Their Role: Choosing a Design*. United Kingdom: SAGE Publications, Ltd.
- McSweeney, F. (2017). Supervision of students in social care education: Practice teachers' views of their role. *Social Work Education*, 36(1), 36–47.
- McWilliam, E. (2009). Teaching for creativity: from sage to guide to meddler. *Asia Pacific Journal of Education*, 29 (3), 281-293.
- Mead, G. H., & Morris, C. W. (1972). *Mind, self, and society: From the standpoint of a social behaviorist*. Chicago: The University of Chicago Press.15th ed.
- Mead, G. H., & Strauss, A. L. (1964). *[The Social Psychology of George Herbert Mead.]* George Herbert Mead on Social Psychology. Selected papers, edited and with an introduction by Anselm Strauss. (Revised edition.). Chicago: University of Chicago Press.
- Mechanic, D. & Tanner, J. (2007). Vulnerable People, Groups, And Populations: Societal View. *Health Affairs – Volume 26, Number 5*.
- Megele, C. (2015). *Psychosocial and relationship-based practice*. Critical Publishing.
- Meierdirk, C. (2012). The limitations of the reflective practitioner. Education-line, 2012. Available at: <http://www.leeds.ac.uk/educol/documents/214830.pdf>.
- Menzies Lyth, I. (1997). *Containing anxiety in institutions*. London: Free Association Books.
- Merriam, S. B. (2009). *Qualitative research: a guide to design and implementation*. San Francisco, Jossey-Bass.
- Merton, R. K. (1948). The Self-Fulfilling Prophecy. *The Antioch Review*, 8, 2, 193-210.

- Meyer, J., H., Land, R. (2003). *Threshold concepts and troublesome knowledge: Linkages to ways of thinking and practising within the disciplines*. Edinburgh: University of Edinburgh.
- Meyer, J.H.F. and Land, R. (2006). *Threshold concepts and troublesome knowledge: Issues of liminality*. In: Meyer, J.H.F. and Land, R. (eds.), *Overcoming Barriers to Student Understanding: threshold concepts and troublesome knowledge*, London and New York: Routledge, pp 19-32.
- Meyer, J.H.F., Land, R. (2005). Threshold concepts and troublesome knowledge (2): Epistemological considerations and a conceptual framework for teaching and learning . *High Education* 49, 373–388. <https://doi.org/10.1007/s10734-004-6779-5>.
- Meyer, Land, and Baillie (2010). *Threshold Concepts and Transformational Learning*. Sense Publishers, Rotterdam.
- Mezirow, J. (1991). *Transformative dimensions of adult learning*. San Francisco, CA: Jossey Bass.
- Mezirow, J. (1994). Understanding transformation theory. *Adult Education Quarterly*, 44(4), 222-223.
- Mezirow, J. (1995). *Adult Education and Empowerment for Individual and Community Development*. Paper for conference presentation, Maynooth, May 24th , 1995.
- Mezirow, J. (1997) Transformative learning: theory to practice. *New Directions for Adult and Continuing Education*, 1997(74), 5-12.
- Mezirow, J. (2000). Learning to think like an adult: Core concepts of transformation theory. In J. Mezirow & Associates (Eds.), *Learning as transformation: Critical perspectives on a theory in progress* (pp. 3-33). San Francisco, CA: Jossey-Bass.
- Miles, R. (2015). Complexity, Representation and Practice: Case Study as Method and Methodology. *Issues in Educational Research*, 25, 309-318.

- Miller, J. J., Grise-Owens, E., Owens, L., Shalash, N., & Bode, M. (2020). Self-Care Practices of Self-Identified Social Workers: Findings from a National Study. *Social Work, 65, 1*, 55-63.
- Miller, W. R. Forcehimes, A., A.& Zweben, A., (2019). *Treating Addiction, Second Edition: A Guide for Professionals*. Guilford Publications.
- Milligan, C., Gatrell, A., & Bingly, A. (2005). "Cultivating health" : therapeutic landscapes and older people in northern England. *Social Science & Medicine*
- Moller, N. P., & Rance, N. (2013). The good, the bad and the uncertainty: Trainees' perceptions of the personal development group. *Counselling and Psychotherapy Research, 13*(4) pp. 282–289.
- Monat, J. P. (2017). The emergence of humanity's self-awareness. *Futures, 86*, 27-35.
- Moon, J. (2000). 'Assessing reflective or experiential learning,' in the Report of the Proceedings of SEEC Conference Crediting Key Skills (4 – 5th Sept, UEL, London).
- Moon, J. (2002). *The module & programme development handbook: A practical guide for linking levels, learning outcomes & assessment*. London: Kogan Page.
- Moon, J. (2002b). *The academic rationale for reflection on and learning from work experience*. In Watton, P., Collings, J. and Moon, J. (eds.) *Independent Work Experience: an evolving picture*. [SEDA paper 114] Birmingham: Staff and Educational Development Association, 57-61.
- Moon, J. A. (2015). *Reflection in learning and professional development: Theory and practice*. Routledge.
- Morrison, T. (2005). *Staff supervision in social care, 3rd edn*, Brighton: Pavilion Publishing.
- Morrow, S. L. (2005). Quality and trustworthiness in qualitative research in counseling psychology. *Journal of Counseling Psychology. 52*, 250-260.

- Mortensen, C. D. (2017). *Communication Theory*. Milton : Routledge.
- Moskowitz, G. (1978). *Caring and sharing in the foreign language class: A sourcebook on humanistic techniques*. Boston (Mass.: Heinle & Heinle).
- Moss, B. (2012). *Communication Skills in Health and Social Care*. London: SAGE Publications Ltd.
- Moss, B.(2020). *Communication skills in nursing, health and social care*. Sage Publication.
- Moylan, C. A., Derr, A. S., & Lindhorst, T. (2015). Increasingly mobile: How new technologies can enhance qualitative research. *Qualitative Social Work: Research and Practice*, 14, 1, 36-47.
- Munn-Giddings, C., & Winter, R. (2013). *A Handbook for Action Research in Health and Social Care*. Hoboken, Taylor and Francis.
- Munro, E. (2011). "*The Munro review of child protection: final report*". HMSO, London.
- Murgatroyd, S. J. (1995). *Counselling and Helping*. Leicester. The British Psychological Society; London: Routledge.
- Nadan, Y., & Stark, M. (2017). The Pedagogy of Discomfort: Enhancing Reflectivity on Stereotype's and Bias. *British Journal of Social Work*. Volume 47, Issue 3, 683–700.
- Narey, M., (2014). *Making the education of social workers consistently effective: report of Sir Martin Narey's independent review of the education of children's social workers*. Department for Education.
- Nelson, L., & Gilbert, J. L. (2021). *Research in communication sciences and disorders: Methods for systematic inquiry*. San Diego, CA : Plural Publishing, Inc.
- Neuman, W. L. (2015). *Social research methods: qualitative and quantitative approaches*. 7th Ed. New Delhi : Pearson Education.

- Newcomb, M., Burton, J., Edwards, N. and Hazelwood, Z. (2015). How Jung's concept of the wounded healer can guide learning and teaching in social work and human services. *Advances in Social Work and Welfare Education*, 17(2), p.55.
- Newell, R. (1992). Anxiety, accuracy and reflection: the limits of professional development. *Advanced Nursing* 17:1326-33.
- Ngai, S. S. (2006). Service-learning, personal development, and social commitment: a case study of university students in Hong Kong. *Adolescence*, 41, 161, 165-76.
- Nicholl, H. (2010). Diaries as a method of data collection in research. *Paediatric Nursing*. 22, 16-21.
- Nichols, L. (2020). *The journey before us: First-generation pathways from middle school to college*. New Brunswick : Rutgers University Press.
- Nietz, H. (2018). "Reframing" relation-based practice in the child protection sector in remote Aboriginal communities of Australia. *Journal of Social Work Practice*. 32, 251-263.
- Nila, K., Holt, D. V., Ditzen, B., & Aguilar-Raab, C. (2016). Mindfulness based stress reduction (MBSR) enhances distress tolerance and resilience through changes in mindfulness. *Mental Health & Prevention*, 4,36 – 41. <http://dx.doi.org/10.1016/j.mhp.2016.01.001>.
- Nilsson, N. J. (2014). *Understanding beliefs*. Cambridge, Massachusetts : MIT Press.
- Nolan, C. (2012). Facilitating Groups (2nd ed.). *European Journal of Training and Development*, 36, 377-380.
- Norcross, J. C., & Lambert, M. J. (2018). Psychotherapy relationships that work III. *Psychotherapy*, 55(4), 303-315. <http://dx.doi.org/10.1037/pst0000193>.
- Northen, H., & Kurland, R. (2001). *Social Work with Groups*. (3rd Edn.) New York: Columbia University Press.
- Nouwen, J. M. (2014). *The Wounded Healer: Ministry in Contemporary Society*, New York: Doubleday.

- O' Farrell, U. (2006). *First steps in counselling*. 2nd ed. Dublin: Veritas.
- O'Brien, E. (2013) *Human Growth and Development an Irish Perspective*. Dublin: Gill & Macmillan. 2nd Ed.
- O'Connor, T. and Murphy, M. (2006).(eds). *Social Care in Ireland: Theory, Policy and Practice*. Cork: CIT Press.
- O'Neill, G. & McMahon, T. (2005). *Student-Centred Learning: What does it mean for students and lecturers?* In S. Moore, G. O'Neill, and B. McMullin (Eds.), *Emerging Issues in the Practice of University Learning and Teaching*. Dublin: AISHE
- O'Connor, I. (2006). *Social work and social care practice*. London: SAGE.
- Odom, S., Hume, K., Boyd, B., & Stabel, A. (2012). Moving Beyond the Intensive Behavior Treatment Versus Eclectic Dichotomy Evidence-Based and Individualized Programs for Learners With ASD. *Behavior Modification*. 36, 270-297.
- Ohly, S., Sonnentag, S., Niessen, C., & Zapf, D. (2010). Diary studies in organizational research: An introduction and some practical recommendations. *Journal of Personnel Psychology*, 9(2), 79–93. <https://doi.org/10.1027/1866-5888/a000009>.
- Ohrt, J. H., Prochenko, Y., Stulmaker, H., Huffman, D., Fernando, D., & Swan, K. (2014). An Exploration of Group and Member Development in Experiential Groups. *Journal for Specialists in Group Work*, 39, 3, 212-235.
- O'Leary, Z. (2017). *Essential guide to doing your research project*. Los Angeles. Sage Publications.
- O'Neill, E. (2004). *Professional supervision: Myth, culture and structure*. Fethard, Tipperary: RMA publications.
- O'Neill, E., (2009). *Using Professional Supervision in Social Care*. In: P. Share and K. Lalor, ed., *Applied Social Care: An introduction for students in Ireland*. 2nd ed. Dublin 12: Gill and Macmillan.

- Orlinsky, D., Schofield, M., Schroder, T., Kazantzis, N. (2011). Utilization of Personal Therapy by Psychotherapists: A Practice-Friendly Review and a New Study. *Journal of Clinical Psychology: In Session*, vol. 67 (8), 828-84.
- Osmond, J., & O'Connor, I. (2006). Use of Theory and Research in Social Work Practice: Implications for Knowledge-Based Practice. *Australian Social Work*, 59, 1, 5-19.
- Ownsworth, T. L., Young, R. M. D., & McFarland, K. (2000). Self-awareness and psychosocial functioning following acquired brain injury: An evaluation of a group support programme. *Neuropsychological Rehabilitation*, 10:5, 465-484, DOI: 10.1080/09602010050143559.
- Page, S., & Wosket, V. (2015). *Supervising the counsellor and psychotherapist: A cyclical model*. New York, NY : Routledge.
- Paris, C. & Combs, B. (2006). Lived meanings: what teachers mean when they say they are learner-centered. *Teachers and Teaching: theory and practice*, 12(5), 571–592. doi: 10.1080/13540600600832296.
- Parker, J. (2010). *Effective Practice Learning in Social Work (2nd Ed)*, Britain: Learning Matters.
- Partington, A. (2021). Developing Inclusive Pedagogies in HE through an Understanding of the Learner-Consumer: Promiscuity, Hybridisation, and Innovation. *Postdigital Science and Education (2021)* 3:102–119.
- Patton, M. Q. (2015). *Qualitative research & evaluation methods: integrating theory and practice*. Los Angeles Sage.
- Payne M. (1991). *Using Social Work Theory in Practice*. In: *Modern Social Work Theory*. Palgrave, London. https://doi.org/10.1007/978-1-349-21161-6_2.
- Payne, G. & Payne, J. (2004). *Key concepts in social research*. London, SAGE.
- Payne, G., & Payne, J. (2015). *Key concepts in social research*. SAGE Publications Ltd.

- Payne, H. (1999). Personal development groups in the training of counsellors and therapists: a review of the research. *The European Journal of Psychotherapy, Counselling and Health*, 2(1), 55-68.
- Payne, H. (2001). Student experiences in a personal development group: the question of safety. *European Journal of Psychotherapy, Counselling and Health*, 4 (2), 267-292.
- Payne, H. (2005) Becoming a Client, Becoming a Practitioner: Student Narratives from a Dance Movement Therapy Group. *British Journal of Guidance and Counselling*, 32, 4, 512-532.
- Payne, H. (2010). Personal development groups in post graduate dance movement psychotherapy training: A study examining their contribution to practice. *The Arts in Psychotherapy*, 37, 3, 202-210.
- Payne, M., & Campling, J. (1990). *Modern Social Work Theory: A Critical Introduction*. London: Palgrave Macmillan Limited.
- Pearlman, L. A., & Caringi, J. (2009). *Living and working self-reflectively to address vicarious trauma*. In C. A. Courtois & J. D. Ford (Eds.), *Treating complex traumatic stress disorders: An evidence-based guide* (p. 202–224). Guilford Press.
- Pellegrino, E. D., Veatch, R. M., & Langan, J. (1996). *Ethics, trust, and the professions: Philosophical and cultural aspects*. Ann Arbor, MI: UMI.
- Peneva, I., & Mavrodiev, S. (2013). A Historical Approach to Assertiveness. *Psychological Thought*, 6, 1, 3-26.
- Perry, B. D., & Szalavitz, M. (2006). *The boy who was raised as a dog : and other stories from a child psychiatrist's notebook : what traumatized children can teach us about loss, love, and healing*. New York: Basic Books.
- Perry, B. D., Pollard, R. A., Blakley, T. L., Baker, W. L., & Vigilante, D. (1996). Childhood trauma, the neurobiology of adaptation, and “use-dependent” development of the brain: How “states” become “traits”. *Infant Mental Health Journal*, 16, 4, 271-291.

- Perry, B., D. (1999). *Bonding and attachment in maltreated children: consequences of emotional neglect in childhood*. Houston, Tex, ChildTrauma Academy.
- Peterson, M. (1992). *At personal risk: Boundary violations in professional-client relationship*. New York.
- Pettinelli, M. R. (2019). *My Final Analysis of Everything - including Emotions, Feelings and Thoughts*. Lulu Press, Inc.
- Phillips, A. (2013). *Developing Assertiveness Skills for Health and Social Care Professionals*. Milton Keynes: Radcliffe Publishing.
- Piasecki, T. M., Hufford, M. R., Solhan, M., & Trull, T. J. (2007). Assessing clients in their natural environments with electronic diaries: rationale, benefits, limitations, and barriers. *Psychological Assessment*. 19, 25-43.
- Pinar, W., Reynolds, W., Slattery, P., & Taubman, P. (1995). Chapter 10: Understanding Curriculum as Autobiographical/Biographical Text. *Counterpoints*, 17, 515-566. Available: <http://www.jstor.org/stable/42974926>.
- Polit, D. F. and Beck, C. T. (2017). *Nursing Research: Generating and Assessing Evidence for Nursing Practice*. 10th Ed. Wolters Kluwer Health, Philadelphia.
- Poole, N., & Greaves, L. (2012). *Becoming trauma informed*. Toronto: Centre for Addiction and Mental Health.
- Potter, S. (2002). *Doing postgraduate research*. London: SAGE Publications in association with the Open University.
- Power, M., & Darcy, P. (2017). *Statutory registration awareness among social care workers in Ireland*. Dublin: Health Service Executive.
- Prendiville, P. (2008). *Developing facilitation skills: A handbook for group facilitators*. Dublin: Combat Poverty Agency. 3rd Ed.
- Prodgers, A. (1991). Countertransference: The Conductor's Emotional Response within the Group Setting. *Group Analysis*, 24, 4, 389-407.

- Prosser, M., & Trigwell, K. (2002). *Understanding learning and teaching: The experience in higher education*. Buckingham: Open University Press.
- Pryce, J., Shackelford, K., & Pryce, D. (2007). *Secondary traumatic stress and the child welfare professional*. Chicago, Lyceum Books. New York : Oxford University Press.
- Pyles, L., & Adam, G. (2016). *Holistic engagement: Transformative social work education in the 21st century*. New York : Oxford University Press.
- Race, P. (2006). *The Lecturer's Toolkit: 3rd Edition* London: Routledge.
- Radcliffe, L. S., & Cassell, C. M. (2015). Flexible working, work–family conflict, and maternal gatekeeping: The daily experiences of dual-earner couples. *Journal of Occupational Organizational Psychology*, 88, 835–855. doi:10.1111/joop.12100.
- Raftery, M. & O'Sullivan, E. (1999). *Suffer the Little Children*. Dublin: New Island Books.
- Råheim, M., Magnussen, L.H., Sekse, R.J.T., Lunde, Å., Jacobsen, T. and Blystad, A. (2016) Researcher–researched relationship in qualitative research: Shifts in positions and researcher vulnerability. *International Journal of Qualitative Studies on Health and Well-Being*, 11 (1): 1-12.
- Rajan-Rankin, S. (2014). Self-Identity, Embodiment and the development of emotional resilience. *British Journal of Social Work*, 44, 8, 2426-2442. doi: 10.1093/bjsw/bct083.
- Reay, D. (2006). The Zombie Stalking English Schools: Social Class and Educational Inequality . *British Journal of Educational Studies*, 54, 3, 288-307.
- Reimer, L. E., & Christmas, R. (2020). *Our shared future: windows into Canada's reconciliation journey*. Lanham, Maryland : Lexington Books, an imprint of The Rowman & Littlefield Publishing Group, Inc.
- Remen, R. N. (2010). *Kitchen table wisdom: Stories that heal*. Sydney: Pan Macmillan Australia.

- Report of the National Committee of Inquiry into Higher Education. *Higher Education in the Learning Society (The Dearing Report)*. July 1997 HMSO, Norwich UK.
- Report on Industrial Schools and Reformatories (The Kennedy Report)* (1970) Dublin: The Stationery Office.
- Resnik, D. B. (2016). *The ethics of research with human subjects: protecting people, advancing science, promoting trust*. Cham, Switzerland : Springer.
- Reupert, A. (2007). Social worker's use of self. *Clinical Social Work Journal*, 35, 107–116. doi:10.1007/s-10615-006-0062-4.
- Richards, J. & Lockhart, C., (1996). *Reflective Teaching in Second Language Classrooms*. Cambridge University Press.
- Richards, K. C., Campenni, E. C., & Muse-Burke, J. L. (2010). Self-care and well-being in mental health professionals: The mediating effects of self-awareness and mindfulness. *Journal of Mental Health Counseling*, 32(3), 247–264. doi:10.17744/mehc.32.3.0n31v88304423806.
- Richards, M., Payne, C., & Shepperd, A. (1990). *Staff supervision in child protection work*. London: National Institute for Social Work.
- Rigaud, J., & Macgowan, M.J. (2019). The theory evaluation scale: An epistemological tool for analyzing social work theories. *Social Work Education*, 38, 269 - 281.
- Roberts, K., Dowell, A., & Nie, J. B. (2019). Attempting rigour and replicability in thematic analysis of qualitative research data; a case study of codebook development. *BMC Medical Research Methodology*, 19:1. pg:1-8.
- Roberts, L. D., & Allen, P. J. (2015). Exploring ethical issues associated with using online surveys in educational research. *Educational Research and Evaluation*. 21, 95-108.
- Robson, C. and McCartan, K. (2016). *Real World Research: A Resource for Users of Social Research Methods in Applied Settings*. 4th ed., London: Wiley.

- Robson, M. & Robson, J. (2008). Explorations of participants' experiences of a Personal Development Group held as part of a counselling psychology training group: Is it safe in here? *Counselling Psychology Quarterly*, 21:4, 371-382.
- Rogers, C. R. (1957). The necessary and sufficient conditions of therapeutic personality change. *Journal of Consulting Psychology*, 21, 95–103.
- Rogers, C. R. (1959). Significant learning in therapy and in education. *Educational leadership*, 16(4), 232-242.
- Rogers, C. R. (1961). *On becoming a person*. Boston, MA: Houghton Mifflin.
- Rogers, C. R. (1969). *Freedom to learn*. Ohio (Estados Unidos: Charles E. Merrill.
- Rogers, C. R. (1977). *Carl Rogers on personal power*. N.Y.: Delacorte Press.
- Rogers, C. R. (1980). *A way of being*. Boston: Houghton-Mifflin.
- Rogers, C. R. (1983). *Freedom to learn for the 80's*. [2. rev. ed.] Columbus, Ohio: Merrill.
- Rogers, C. R. (1986). *Client-centered therapy: Its current practice, implications and theory*. London: Constable.
- Rogers, C. R. (2012). *Encounter groups: Carl R. Rogers*. Harmondsworth: Penguin Books.
- Rogers, C. R., & Carmichael, L. (2014). *Counseling and psychotherapy: newer concepts in practice*. Cambridge, Mass, Riverside Press.
- Rogers, C. R., & Farson, R. E. (1957). *Active listening*. Chicago: Industrial Relations Center, the University of Chicago.
- Rogers, C.R. (1951). *Client-centered therapy*. Houghton Mifflin.
- Rogers, C.R. (1965). The concept of the fully functioning person. *Pastoral Psychol* 16, 21–33. <https://doi.org/10.1007/BF01769775>.
- Rokeach, M. (1973). *The nature of human values*. New York, NY, US: Free Press.

- Rolfe, G., Freshwater, D., Jasper, M. (2001) (eds.) *Critical Reflection for Nursing and the Helping Professions*. Basingstoke, U.K: Palgrave.
- Rønnestad, M. H., & Skovholt, T. M. (2013). *The developing practitioner: Growth and stagnation of therapists and counselors*. New York: Routledge.
- Rønnestad, M. H., Orlinsky, D. E., Schröder, T. A., Skovholt, T. M., Willutzki, U. (2019). The professional development of counsellors and psychotherapists: Implications of empirical studies for supervision, training and practice. *Couns Psychother Res*. 2019; 19: 214– 230. <https://doi.org/10.1002/capr.12198>.
- Rose, C. (2018). *The Personal Development Group: The Student's Guide*. Routledge.
- Rosenberg, M., B. (2012). *Living nonviolent communication: Practical tools to connect and communicate skilfully in every situation*. Boulder, Colorado Sounds True.
- Rowell, P., & Benshoff J. M. (2008). Using Personal Growth Groups in Multicultural Counseling Courses to Foster Students' Ethnic Identity Development. *Counselor Education and Supervision*. 48, 2-15.
- Ruch, G., Winter, K., Cree, V., Hallett, S., Morrison, F., & Hadfield, M. (2017). Making meaningful connections: using insights from social pedagogy in statutory child and family social work practice. *Child and Family Social Work*, 22, 2, 1015-1023.
- Ryan, M., Fitzgerald, M., Kirwan, B., & Walsh, M. (2013). Changing the Goalposts: from touchy feely to optimum human functioning? Published in 2013 Proceedings from 14th CSSI Conference: '*Mind Body Spirit –The Holistic Approach to Student Experience*.' Dundalk 2013.
- Ryan, R. M., & Deci, E. L. (2018). *Self-determination theory: Basic psychological needs in motivation, development, and wellness*. Guilford Press.
- Saldana, J. (2015). *The coding manual for qualitative researchers*. Los Angeles: SAGE.
- Salloum, A., Kondrat, D. C., Johnco, C., & Olson, K. R. (2015). The role of self-care on compassion satisfaction, burnout and secondary trauma among child welfare

workers. *Children & Youth Services Review*, 49, 54–61.
doi:10.1016/j.chidyouth.2014.12.023.

Sampson, F. (2004). *Creative writing in health and social care*. London: Jessica Kingsley Publishers.

Satir, V. (1983). *Conjoint family therapy: A guide to theory and technique*. 3rd Ed. Palo Alto: Science and Behavior Books.

Satir, V. (1988). *The new people making*. Mountain View, Calif: Science and Behavior Books.

Saylor, C. R. (1990) Reflection and professional education: art, science and competency. *Nurse Educator*, 15, 2.

Schnyder, U., & Cloitre, M. (2016). *Evidence based treatments for trauma-related psychological disorders: A practical guide for clinicians*. New York, USA: Springer.

Schoenholz-Read, J. (2000). *Interim report on student development and diversity study*. Unpublished manuscript. Fielding Graduate Institute, Santa Barbara, CA.

Schön, D. A. (1983). *The reflective practitioner: How Professionals Think in Action*. New York : Basic Books.

Schön, D. A. (1990). *Educating the reflective practitioner*. San Francisco: Jossey-Bass.

Schön, D. A. (2005). *The reflective practitioner: How professionals think in action*. Aldershot: Ashgate.

Schore, A. N. (1994). *Affect regulation and the origin of the self: The neurobiology of emotional development*. New York, N.Y. London: Psychology Press.

Schore, A. N. (2014). The Right Brain Is Dominant in Psychotherapy. *Psychotherapy River Edge-*, 51, 3, 388-397.

Schore, A. N., & Cordes, J. (2005). Affect Dysregulation and Disorders of the Self. *Journal of the American Academy of Child & Adolescent Psychiatry*, 44, 3, 301-302.

- Schuman, S., (2012). The IAF Handbook of Group Facilitation: Best Practices from the Leading Organizations in Facilitation. *International Association of Facilitators, Vol. 1*. John Wiley & Sons, California.
- Schwandt, T. A. (2007). *The SAGE dictionary of qualitative inquiry*. London: SAGE.
- Schwartz, A. E. (2006). *Assertiveness training: Responsible Communication*. Waverley, MA: A.E. Schwartz & Associates.
- Schwartz, S. H. (2012). An Overview of the Schwartz Theory of Basic Values. *Online Readings in Psychology and Culture, 2, 1*.
- Schwartzman, L. (2010). *Transcending Disciplinary Boundaries: A Proposed Theoretical Foundation for Threshold Concepts*. 21-44. Sense Publishers.
- Schwarz, R. (2002). *The skilled facilitator: A comprehensive resource for consultants, facilitators, managers, trainers, and coaches*. San Francisco: Jossey-Bass.
- Scott, C. G., Nolin, J., & Wilburn, S. T. (2006). Barriers to effective clinical supervision for counseling students and postgraduate counselors: Implications for rehabilitation counselors. *Rehabilitation Education, 20(2)*, 91-102.
- Scott, G. (2013). Social media is blurring professional boundaries. *Nursing Standard (royal College of Nursing (great Britain) : 1987), 27, 52, 28*.
- Seery, A. (2010). Education, the formation of self and the world of web 2.0. *London Review of Education, 8, 1*, 63-73.
- Seidman, I. (2013). *Interviewing as qualitative research: a guide for researchers in education and the social sciences*. New York, Teachers College Press.
- Seigel, J. E. (2005). *The idea of the self: Thought and experience in Western Europe since the seventeenth century*. Cambridge: Cambridge University Press.
- Sellman, D. (2012). *Reclaiming competence for professional phronesis*. In E. A. Kinsella & A. Pitman (Eds.), *Phronesis as professional knowledge: Practical wisdom in the professions* (pp. 115– 130). Dordrecht, The Netherlands: Sense Publishers.

- Selye, H. (1950). *The physiology and pathology of exposure to stress: A treatise based on the concepts of the general-adaptation-syndrome and the diseases of adaptation*. Montreal: Acta.
- Selye, H. (1975). *Stress without distress*. London. Toronto : Hodder and Stoughton, 1975.
- Shapiro, D. H. (1980). *Meditation: Self-regulation strategy & altered state of consciousness*. New York: Aldine.
- Share, P. & McElwee, N., (2005). 'The professionalisation of social care in Ireland?' In P. Share & N. McElwee (eds) *Applied social care: An introduction for Irish students*. Dublin: Gill and Macmillan.
- Sharpe, E., Moriarty, J., Stevens, M., Manthorpe, J., & Hussein, S. (2011). *Into the work force: Report on a study of new social work graduates*. London: Sharpe Research; Social Care Workforce Research Unit; King's College London.
- Shaw, M. (2017). *Humanistic theoretical framework*. In A. Wenzel (Ed.), *The sage encyclopedia of abnormal and clinical psychology* (Vol. 1, pp. 1707-1710). SAGE Publications, Inc., <https://www.doi.org/10.4135/9781483365817.n685>.
- Shaw, R. L., Hiles, D. R., West, K., Holland, C., & Gwyther, H. (2018). From Mixing methods to the logic(s) of inquiry: taking a fresh look at developing mixed design studies. *Health Psychology and Behavioral Medicine*, 6:1, 226-244. <https://doi.org/10.1080/21642850.2018.1515016>.
- Sheppard, M. (2007). *Assessment: From reflexivity to process knowledge*. In J. Lishman (Ed.), *Handbook for practice learning in social work and social care* (pp. 128–137). London: Jessica Kingsley.
- Shockley-Zalabak, P., Morreale, S. P., & Hackman, M. Z. (2010). *Building the high-trust organization: Strategies for supporting five key dimensions of trust*. New York: Wiley.
- Shor, I. & Freire, P (1987). What is the 'dialogical method' of teaching? *Journal of Education*. Sage Journals. doi.org/10.1177/002205748716900303.

- Shulman, L. (1987). The Hidden Group in the Classroom: The Use of Group Process in Teaching Group Work Practice. *Journal of Teaching in Social Work*, 1, 2, 3-31.
- Shulman, L. S. (2005). Pedagogies of Uncertainty. *Liberal Education*, 91, 2, 18-25.
- Shumaker, D., Ortiz, C. & Brenninkmeyer, L. (2011). Revisiting experiential group training in counselor education: A survey of master's-level programs. *The Journal for Specialists in Group Work*, 36, 111-128.
- Sidani, S. (2015). *Health intervention research: Understanding research design & [and] methods*. London: Sage.
- Sidani, S., Miranda, J., Epstein, D. R., Bootzin, R. R., Cousins, J., & Moritz, P. (2009). Relationships between personal beliefs and treatment acceptability, and preferences for behavioral treatments. *Behaviour Research and Therapy*, 47, 10, 823-829.
- Sieber, J. E. (1992). *Planning ethically responsible research: a guide for students and internal review boards*. London. Sage.
- Sieff, D. F. (2015). *Understanding and healing emotional trauma: Conversations with pioneering clinicians and researchers*. London: Routledge/ Taylor & Francis.
- Siegel, D. J. (2007). *The mindful brain: reflection and attunement in the cultivation of well-being*. New York, NY: Norton.
- Sigelman, L., & Welch, S. (1993). The contact hypothesis revisited: Black-white interaction and positive racial attitudes. *Social Forces*, 71, 781-795.
- Silverman, R. & Patterson, K., (2015). *Qualitative research methods for community development*. New York: Routledge.
- Skills for Care, Effective supervision in adult social care – Free summary edition, (Leeds, 2015) www.skillsforcare.org.uk
- Skovholt, T. M., & Trotter-Mathison, M. (2011). *The resilient practitioner: Burnout prevention and self-care strategies for counselors, therapists, teachers, and health professionals*. New York: Routledge.

- Slight, A., & Bloxham, S. (2005). Embedding personal development planning into the social sciences. *Learning and Teaching in the Social Sciences*, 2, 3, 191-206.
- Smith, H., & Smith, M. (2008). *The art of helping others: Being around, being there, being wise*. London: Jessica Kingsley Publishers.
- Smith, J. A., & Osborn, M. (2003). *Interpretative phenomenological analysis*. In J. A. Smith (Ed.), *Qualitative psychology: A practical guide to research methods* (p. 51–80). Sage Publications, Inc.
- Social Care Ireland :<https://socialcareireland.ie/what-is-social-care-work/>
- Social Care Workers Registration Board (SCWRB) (2017b). *Standards of proficiency for social care workers*. Dublin: CORU Health and Social Care Regulator.
- Social Care Workers Registration Board (SCWRB) (2019). *Social Care Workers Registration Board Code of Professional Conduct and Ethics*. Dublin: CORU Health and Social Care Regulator.
- Sokolowski, R. (2000). *Introduction to phenomenology*. Cambridge: University Press.
- Solomon, M. F., & Siegel, D. J. (2003). *Healing trauma: Attachment, mind, body, and brain*. New York: W.W. Norton & Company.
- Soukup, B. (2012). Current Issues in the Social Psychological Study of ‘Language Attitudes’: Constructionism, Context, and the Attitude-Behavior Link. *Language and Linguistics Compass*. 6, 212-224.
- Sox, H. C., Helfand, M., Grimshaw, J. Dickenson, K., Torvey, D. (2010). Comparative effectiveness research: challenges for medical journals. *Trials*, 7 (4): E 1000269.
- Spencer, L. (2006). Tutors’ stories of personal development training - attempting to maximize the learning potential. *Counselling and Psychotherapy Research*, 6, 2, 108-114.

- Staempfli, A., Kunz, R., & Tov, E. (2012). Creating a bridge between theory and practice: Working with key situations. *European Journal of Social Education*, 22, 60–69.
- Stake, R. E. (1995). *The art of case study research*. Thousand Oaks, Calif: Sage.
- Stake, R. E. (2010). *Qualitative research: Studying how things work*. New York : Guilford Press.
- Stanley, S. A. (2016). *Relational therapy and body-centered practices for healing trauma*. London, UK: Routledge.
- Steckley, L. (2020). Threshold concepts in residential child care: Part 1, the selves of learners and their praxis. *Children and Youth Services Review*, 112.
- Stella, M. (2016). Befriending death: A mindfulness-based approach to cultivating self-awareness in counselling students. *Death Studies*, 40, 1, 32-9.
- Stempler, B. J. (1993). Supervisory co-leadership. *Social Work with Groups*, 16(3), 97–110.
- Stern, D. N. (2001). *The interpersonal world of the infant: A view from psychoanalysis and developmental psychology*. New York: Basic Books.
- Stern, D. N. (2002). *The first relationship: infant and mother*. Cambridge, Mass, Harvard University Press.
- Stern, D. N. (2004). *The present moment in psychotherapy and everyday life*. New York: Norton.
- Stoesen, L. (2008). 'Report explores social worker stress', *NASW News*, vol. 53, no. 4, p. 9.
- Storo, J. (2013). *Practical Social Pedagogy: Theories, values and tools for working with children and young people*. Policy Press, Bristol.
- Stoykov, A. (2020). Dynamics of assertive behavior in the social work students. *Amazonia Investiga*, 9(28), 14-21. <https://doi.org/10.34069/AI/2020.28.04.2>.

- Stratton, J. (1999). *Critical Thinking for college students*: Boston, Rowman and Littlefield Publishers.
- Streiner, D. L.; Norman, G. R. (1995). *Health Measurement Scales: A Practical Guide to their Development and Use*. Oxford University Press; New York.
- Stronge, J. H. (2018). *Qualities of effective teachers*. Alexandria, Virginia. : ASCD.
- Sulloway, F. J. (1991). Reassessing Freud's Case Histories: The Social Construction of Psychoanalysis. *Isis*. 82, 245-275.
- Sun, J., Patel, F., Rose-Jacobs, R., Frank, D. A., Black, M. M., & Chilton, M. (2017). Mothers' Adverse Childhood Experiences and Their Young Children's Development. *American journal of preventive medicine*, 53(6), 882–891. <https://doi.org/10.1016/j.amepre.2017.07.015>
- Suter, W. N. (2012). *Introduction to educational research: A critical thinking approach*. Los Angeles: SAGE.
- Sutton, A. (2016). Measuring the Effects of Self-Awareness: Construction of the Self-Awareness Outcomes Questionnaire. *Europe's Journal of Psychology*, 12(4), 645-658. <https://doi.org/10.5964/ejop.v12i4.1178>.
- Sutton, A., Williams, H. M., & Allinson, C. W. (2015). A longitudinal, mixed-method evaluation of self-awareness training in the workplace. *European Journal of Training and Development*, 39, 610-627.
- Sweifach, J. (2014). Group work education today: A content analysis of MSW group work course syllabi. *Social Work with Groups*, 37(1), 8–22.
- Symon, G. (2004). *Qualitative research diaries*. In C. M. Cassell & G. Symon (Eds.), *Essential guide to qualitative methods in organizational research* (pp. 98–112). London, UK: Sage.
- Tajfel, H. (2010). *Social identity and intergroup relations*. Cambridge: Cambridge University Press.

- Tamdgidi, M. H. (2008). Editor's Note: Thich Nhat Hanh's Sociological Imagination. *Human Architecture: Journal of the Sociology of Self-Knowledge*. 6, 1.
- Tarshis, S., & Baird, S. L. (2018). Addressing the Indirect Trauma of Social Work Students in Intimate Partner Violence (IPV) Field Placements: A Framework for Supervision. *Clinical Social Work Journal*, 47, 1, 90-102.
- Task force on child care services (1980). *Final report to the Minister for Health*. Dublin: Stationery Office.
- Taylor, E. W. E. W., & Cranton, P. (2012). *The handbook of transformative learning: Theory, research, and practice*. San Francisco: Jossey-Bass.
- Taylor, S. (2000). *Essential communication skills*. Upper Saddle River, NJ: Pearson Education.
- Teater, B. (2014). *An Introduction to Applying Social Work Theories and Methods*. London: McGraw Hill Education.
- Thomas, G. (2017). *How to do your research project: a guide for students*. London. Sage.
- Thomas, L. (2012). *What works?: Building student engagement and belonging in Higher Education at a time of change*. Higher Education Academy (Great Britain).
- Thompson, N. (2015). *People Skills.*, New York: Palgrave Macmillan.
- Thorne, B. (1992) *Carl Rogers*. London: Sage.
- Thyer, B. A. (1994). Are Theories for Practice Necessary? No1. *Journal of Social Work Education*, 30, 2, 144.
- Tomlinson, P. (2004). *Therapeutic approaches in work with traumatized children and young people: theory and practice*. London, Jessica Kingsley.
- Tomlinson-Clarke, S. M., & Clarke, D. L. (2016). *Social Justice and Transformative Learning: Culture and Identity in the United States and South Africa*. New York. Taylor and Francis.

- Tovey, H., & Share, P. (2003). *A Sociology of Ireland*. Dublin: Gill & Macmillan.
- Trevithick, P. (2017). *Social work skills and knowledge: A practice handbook*. Johannesburg: MTM.
- Tunis, S. L., Ascher-Svanum, H., Stensland, M., & Kinon, B. J. (2004). Assessing the Value of Antipsychotics for Treating Schizophrenia: The Importance of Evaluating and Interpreting the Clinical Significance of Individual Service Costs. *Pharmacoeconomics*, 22, 1, 1-8.
- Turner, V. W., & Mitchell, J. P. (1969). *The Ritual Process: Structure and anti-structure*. London Routledge. Kegan Paul
- Turney, D., Ruch, G., & Ward, A. (2018). *Relationship-Based Social Work: Getting to the Heart of Practice*. Philadelphia : Jessica Kingsley Publishers.
- United Nations Convention on the Rights of the Child (UNCRC). <https://www.childrensrights.ie/resources/united-nations-convention-rights-child-introduction-childrens-rights-alliance>.
- Urdang, E. (1999a). 'The influence of managed care on the MSW social work student's development of the professional self'. *Smith College Studies in Social Work*, vol. 70, pp. 3–25.
- Urdang, E. (2008). *Human behavior in the social environment: Interweaving the inner and outer worlds*. New York: Routledge.
- Urdang, E. (2010). Awareness of Self-A Critical Tool. *Social Work Education*, 29, 5, 523-538.
- Valerio, M. A., Rodriguez, N., Winkler, P., Lopez, J., Dennison, M., Liang, Y and Turner, B. J. (2016). *Comparing two sampling methods to engage hard-to-reach communities in research priority setting*. BMC Medical Research Methodology. <https://doi.org/10.1186/s12874-016-0242-z>.
- Van Aartsengel, A. & Kurtoğlu, S. (2015). *A Guide to Continuous Improvement Transformation: Concepts, Processes, Implementation*. Berlin : Springer.

- Van Bommel. M., Kwakman, K., & Boshuizen, H. P. A. (2015). Employers' Views on Desirable Theoretical Knowledge Qualities of Newly Qualified Social Workers: A Qualitative Exploration. *British Journal of Social Work*, 45, 4, 1330-1348.
- van der Kolk, B (1989). The compulsion to repeat the trauma. Re-enactment, revictimization, and masochism. *The Psychiatric Clinics of North America*, 12, 2, 389-411.
- van der Kolk, B (2014). *The Body Keeps the Score: Mind, Brain and Body in the Transformation of Trauma*. London : Penguin Books.
- van der Kolk, B. (2005). Developmental Trauma Disorder: Towards a rational diagnosis for children with complex trauma histories. *Psychiatric Annals*, 33(5), 401-408.
- van Gennep A. (1960). *The rites of passage*. Chicago: University of Chicago Press.
- van Heugten, K. (2011). *Social work under pressure: How to overcome stress, fatigue and burnout in the workplace*. London: Jessica Kingsley Publishers.
- van Lier, L. (1996). *Interaction in the language curriculum. Awareness, autonomy and authenticity*. London: Longman.
- Van Servellen, G., (2009). *Communications skills for the health care professional: Concepts, practices and evidence*. Sudbury: Jones and Bartlett.
- Velleman, R. & Aris, S. (2009). *Counselling and Helping*. London, Methuen & Co Ltd.
- Vernelle, B., (1994). *Understanding and Using Groups (Groupwork)*. Whiting & Birch Publisher. ISBN 10: 1871177618 ISBN 13: 9781871177619.
- Vindrola-Padros, C., Martins, A., Coyne, I., Bryan, G. and Gibson, F. (2016). From informed consent to dissemination: using participatory visual methods with young people with long-term conditions at different stages of research. *Global Public Health*, 11 (5-6): 636-650.
- Volume 58, Issue 9, 1781-1793. doi.org/10.1016/S0277-9536(03)00397-6.

- Vossler, A., Moller, N. & Cooper, M. (2015). Setting the scene - Why research matters. In A. Vossler & N. Moller (eds.), *The Counselling & Psychotherapy Research Handbook* (p. 3-16). London: Sage.
- Vygotsky, L. S., Rieber, R. W., Veer, R. ., & Wollock, J. (1997). *The collected works of L. S. Vygotsky: 3.* (The collected works of L. S. Vygotsky.) New York: Plenum.
- Waddington, K. (2013). "Using qualitative diary research to understand emotion at work". Chapter 10 in A. B. Bakker and K. Daniels (eds) *A Day in the Life of a Happy Worker*. Hove: Psychology Press.
- Walsh, K., D., and Andersen, P., (2013). Group Facilitation as Hermeneutic Practice. *Group Facilitation: A Research and Applications Journal*, Number 12, 2013.
- Ward, A. (1999). The 'matching principle': designing for process in professional education. *Social Work Education*, 18, 2, 161-169.
- Ward, A. (2008). 'Beyond the instructional mode: Creating a holding environment for learning about the use of self'. *Journal of Social Work Practice*, 22(1), pp. 67–83.
- Warren, S., & Chappell Deckert, J. (2020). Contemplative Practices for Self-Care in the Social Work Classroom. *Social Work*, Volume 65, Issue 1, 11–20. <https://doi.org/10.1093/sw/swz039>.
- Watkins, C. E., & Milne, D. (2014). *The Wiley international handbook of clinical supervision*. Chichester: Wiley Blackwell.
- Watts, M. (2014). *Stress Free Living: How to Relax and Reduce Stress Easily: A Simple Step by Step Guide to use Stress Relief Techniques*. America. Speedy Publishing LLC.
- Weathington, B. L., Cunningham, C. J. L., & Pittenger, D. J. (2017). *Research methods for the behavioral and social sciences*. Wiley.
- Webne-Behrman, H. (2006). *The practice of facilitation: Managing group process and solving problems*. Greenwich, CT.: Information Age.

- Weimer, M. (2003). Focus on learning, transform teaching. *Change: The Magazine of Higher Learning*, 35(5), 48–54. doi:10.1080/00091380309604119.
- Wessells, J. D. T. (2013). *Professional Burnout in Medicine and the Helping Professions*. Routledge.
- Westergaard, J. (2009). *Effective Group Work with Young People*. 1st ed. New York: Open University Press.
- Westergaard, J. (2013). Counselling young people: counsellors' perspectives on 'what works' – an exploratory study. *Counselling and Psychotherapy Research*, 13, 98–105.
- Westwood, J. (2019). *Social media in social work practice*. Los Angeles : SAGE.
- Weyers, M., Strydom, H., & Huisamen, A. (2008). Triangulation in social work research : the theory and examples of its practical application. *Social Work*, 44, 207-222.
- Wheatley, M. J. (1998). *Leadership and the new science: Learning about organization from an orderly universe*. San Francisco: Berrett-Koehler Publications.
- Wheeler, S. (2000). What makes a Good Counsellor? An Analysis of Ways in which Counsellor Trainers Construe Good and Bad Counselling Trainees. *Counselling Psychology Quarterly*, 13, 65-83.
- Whitaker, P. (2001). *Challenging behaviour and autism: Making sense - making progress*. National Autistic Society.
- Whittaker D. S. (2001) *Using groups to help people*. Routledge, London.
- Whyte, J. (1980). *Church and State in Modern Ireland 1923–1979*. 2nd ed. Dublin: Gill and Macmillian, 1980.
- Wiles, R. (2012). *What are qualitative research ethics?* London, Bloomsbury Academic.
- Wilkins, D. (1997). *Personal and professional development for counsellors*. London: Sage.

- Wilkins, P. (2006). *Professional and personal development*. In C. Feltham & I. Horton (Eds.), *The SAGE Handbook of Counselling and Psychotherapy* (2nd ed) (pp. 158-165). London: Sage.
- Wilkinson, M. (2004). *The secrets of facilitation: The S.M.A.R.T. guide to getting results with groups*. San Francisco, Calif: Jossey-Bass.
- Wilks, S. E., & Spivey, C. A. (2010). Resilience in undergraduate social work students: Social support and adjustment to academic stress. *Social Work Education*, 29, 276–288. doi:10.1080/02615470902912243.
- Williams, D. I., & Irving, J. A. (1996). Personal Growth: Rogerian Paradoxes. *British Journal of Guidance and Counselling*, 24, 2, 165-72.
- Williams, D., & Lalor, K. (2001). *Obstacles to the Professionalisation of Residential Child Care Work*. Dublin Institute of Technology.
- Williams, E. N., & Morrow, S. (2009). Achieving trustworthiness in qualitative research: A pan-paradigmatic perspective. *Psychotherapy Research*. 19, 576-582.
- Williamson-Ashe, S., R., & Ericksen, K., S. (2017). Social Work Student Perceptions of Group Work and the Presence of Value Themes That Correspond to Group Work Success. *Journal of Social Work Values and Ethics*, 14 (2) 43-53.
- Willig, C., (2013) *Introducing Qualitative Research in Psychology, Adventures in theory and method*. Open University Press. Buckingham . Philadelphia.
- Willis, J. (1995). A recursive, reflective instructional design model based on constructivist-interpretist theory. *Educational Technology*, 35(6), 5-23.
- Willis, N. G., & Molina, V. (2019). Self-care and the social worker: Taking our place in the code. *Social Work (united States)*, 64, 1, 83-85.
- Wilson, T. D. (2004). *Strangers to ourselves: Discovering the adaptive unconscious*. Cambridge : Harvard University Press.
- Winnicott, D. W. (1960). The theory of the parent-infant relationship. *The International Journal of Psycho-Analysis*, 41.

- Winnicott, D. W. (1960a). *Ego distortion in terms of true and false self*. In: The maturational processes and the facilitating environment. Madison, CT: International Universities Press, 1987, pp. 140-152.
- Winnicott, D. W. (1965). *Maturational processes and the facilitating environment: Studies in theory of emotional development*.
- Winnicott, D. W. (1965). *Studies in the theory of emotional development*. London: Hogarth Press.
- Winnicott, D. W. (1985). *Playing and Reality*. Middlesex: Penguin Books.
- Wise, E. H., & Reuman, L. (2019). Promoting competent and flourishing life-long practice for psychologists: A communitarian perspective. *Professional Psychology, Research and Practice*, 50, 129 –135. <http://dx.doi.org/10.1037/pro0000226>
- Wise, E. H., Hersh, M. A., & Gibson, C. M. (2012). Ethics, self-care and well-being for psychologists: Reenvisioning the stress-distress continuum. *Professional Psychology: Research and Practice*, 43(5), 487–494. <https://doi.org/10.1037/a0029446>
- Wittenbaum, G. M., Hollingshead, A. B., Paulus, P. B., Hirokawa, R. Y., Ancona, D. G., Peterson, R. S., Jehn, K. A., Yoon, K. (2004). The Functional Perspective as a Lens for Understanding Groups. *Small Group Research*, 35, 1, 17-43.
- Woolfe, R. (1992). *Experiential learning in workshops*. In Hobbs, T. (ed.) 1992. *Experiential training: practical guidelines*. London: Tavistock/Routledge, 1-13.
- Yalom, I. D. (1975). *The theory and practice of group psychotherapy*. New York : Basic Books.
- Yalom, I. D. (2015). *Creatures of a day: And other tales of psychotherapy*. Melbourne, Victoria : Scribe Publications.
- Yin, R. K. (2004). *The case study anthology*. Thousand Oaks: Sage.

- Yin, R.,K. (2018). *Case study research and applications: design and methods*. 6th ed. California: SAGE Publications.
- Zahavi, D., Grünbaum, T., & Parnas, J. (2004). *The Structure and Development of Self-Consciousness: Interdisciplinary*. John Benjamins Publishing Company.
- Zastrow, C. (2009). *Social work with groups: A comprehensive workbook*. Belmont, Calif: Brooks/Cole Cengage Learning.
- Zastrow, C., & Kirst-Ashman, K. K. (2016). *Understanding human behavior and the social environment*. Boston, MA : Cengage.
- Zegers, M.A.M., Schuengel, C., van IJzendoorn, M.H., & Janssens, J.M.A.M. (2006). Attachment representations of institutionalized adolescents and their professional caregivers: Predicting the development of therapeutic relationships. *American Journal of Orthopsychiatry* vol.76 p.325-334 [ISSN 0002-9432].
- Zosky, D. (2013). Wounded healers: Graduate students with histories of trauma in a family violence course. *Journal of Teaching in Social Work*, 33, 239 –250. <http://dx.doi.org/10.1080/08841233.2013.795923>.
- Žukauskas, P., Vveinhardt, J. and Andriukaitienė, R., (2018). *Philosophy and Paradigm of Scientific Research. In Management Culture and Corporate Social Responsibility*. Publisher: [S.I.] : IntechOpen.

Appendices

Appendices

Appendices

Appendix A: Interview Guide for SCW Graduates

Work

Q1 Let's talk about what you have been doing since you finished your exams and found yourself in the workplace with a SCW honours degree and if PD features in your work?

Q2 At what moments, if at all, do you get to think about PD in your daily work life?

Q3 What can you say about PD and its relevance to your work in Social Care?

Placement

Q4 Do you remember your placements and if PD had any relevance around your experiences?

Q5 What can you tell me about your learning whilst on placement and what led to those learning moments?

Q6 Can you describe any personal learning you noticed whilst on placement?

Social Care Learning

Q7 You studied PD for 4 years, can you tell me a little about what that was like for you?

Q8 Can you remember any significant learning for you around self-awareness?

Q9 Can you remember what version of (your) self began PD in year 1 and how that compares to the self that completed PD in Year 4?

Q10 What if anything from PD left a lasting impression on you?

Q11 Is there anything you would change about the PD module?

Appendix B: Interview Guide for PE's

Q1 Did you receive any experiential or PD learning when undertaking your undergraduate training?

Q2 What qualities are you looking for when you take a Social Care learner for their practice education placement?

Q3 Do you notice any differences between a learner that undertakes their 2nd year placement and a learner that undertakes a 3rd year placement?

Q4 If one learner could only bring theory based knowledge and the 2nd learner PD knowledge to the work, which learner would you choose and why?

Q5 Having provided practice education placements for learners with PD training, do you notice any benefits for the individual the learners work with?

Q6 Have you provided practice education placement for learners with little or no PD training and if so, what has that been like for you, the learners and the individuals the learner works with?

Q7 What elements of the Social Care programme do you think helps Social Care learners cope with some of the situations they encounter whilst undertaking their practice education placement?

Q8 Supervision is required weekly whilst the learner is undertaking their practice education placement, do you think any elements of the Social Care learners training prepares them to meaningfully engage with the supervision process?

Q9 Having viewed the module and learning outcomes, is there anything you would like to see added or removed from the module?

Appendix C: Online Diary Questions for SCW Graduates

Participant PD Journal

1. Was any of your previous PD learning, professionally/personally, useful last week?

Mark only one oval.

- ☐ Yes
☐ No

2. If useful, what happened to make you think of PD?

3. What elements of PD were useful to you? Tick all that are relevant

Tick all that apply.

- ☐ Addictions
- ☐ Assertiveness
- ☐ Behaviour
- ☐ Emotions
- ☐ Facilitation
- ☐ Family relationships/Family roles
- ☐ Life Story
- ☐ Loss and Grief
- ☐ Mental health
- ☐ Mindfulness/Meditation
- ☐ Reflexivity/Reflection
- ☐ Self Awareness
- ☐ Self Care
- ☐ Self esteem/confidence building
- ☐ Supervision
- ☐ Working relationships with service users
- ☐ Working relationships with staff
- ☐ Boundaries

Other: ☐ _____

4. Briefly explain why you chose the above option(s)

5. How did your previous PD learning assist with what happened?

6. Have you received any similar PD learning since you graduated from LIT?

Mark only one oval.

- ☐ Yes
☐ No

7. If "yes" what has it been and how did it help?

8. Thank you, have a good week ahead

Example: 7 January 2019

This content is neither created nor endorsed by Google.

Appendix D: Information Letters

Information Letter SCW graduates and potential diarists

 Trinity College Dublin Coláiste na Tríonóide, Baile Átha Cliath The University of Dublin maughang@tcd.ie (087)7814883	Ms. Geraldine Maughan School of Education Trinity College, College Green, Dublin2.

Dear XXXX,

Thank you for taking the time to learn about my research and complete the attached consent form if you wish to participate.

Currently, I am a postgraduate student studying for the award of PhD award at the above university.

As a Social Care Practitioner and academic, I became interested in the impact and value of Personal development(PD) to both Social Care learners and their In-Service Supervisors. Hence, my research question "What is the role of the PD module for SCL's in HE, PE's and SCW's and their practice?".

Your participation involves allowing me to meet with you to explore, through a semi-structured interview and or focus group, your experiences of PD as a recent Social Care Work graduate and having undertaken 2 SCW PE's of 13 and 15 weeks respectively. You must currently be volunteering or working in a field related to SCW to participate. There are no right or wrong answers, the answers should be based on your experiences, thoughts and understanding of PD as it related to your learning and now your practice.

Your participation, if you consent and then having received the interview guide, involves allowing me to interview you. If participating in an individual interview you will be invited to keep a PD diary for 10 weeks. It is important to note participating in an interview does **not** mean you must keep the diary, this is completely voluntary as is agreeing to participate in interviews, focus groups or both interviews. The diary aspect will be discussed further at

interview. It is anticipated the interview will require approximately 30 minutes to 60 minutes of your time.

To protect your identity, you will be required to choose a pseudo name on the day of your participation.

With your permission audio recording devices will record our interview in order not to rely solely on memory and to avoid inaccuracies.

Ethical approval has been granted from Trinity College. You are free to withdraw at any time and without explanation or consequence.

All data will be stored immediately following collection in a locked drawer in my office and I have the only key which will remain with me. The audio recorded interviews and transcripts will be stored in a password protected PC folder. Any hard copies of transcripts will either be in my possession at all times or locked in a drawer in my office until such time as the research is graded (+2years to facilitate further writing) and then all files containing data and transcripts will be destroyed and deleted. My supervisors are the only people who may request to see or hear the anonymised data.

I will send you the transcript of your contribution to the interview to ensure accuracy.

Don't hesitate to contact me if you have further questions.

Yours sincerely,



Information Letter PE's

 Trinity College Dublin Coláiste na Tríonóide, Baile Átha Cliath The University of Dublin maughang@tcd.ie (087)7814883	Ms. Geraldine Maughan School of Education Trinity College, College Green, Dublin2.

Dear XXXXX

Thank you for taking the time to learn about my research and complete the attached consent form if you wish to participate.

Currently, I am a postgraduate student studying for the award of PhD at the above university.

As a Social Care Practitioner and academic, I became interested in the impact and value of Personal development (PD) to both Social Care learners and their Practice Educators/Supervisors. Hence, my research question "What is the role of the PD module for SCL's in HE, PE's and SCW's and their practice?"

Your participation as a PE involves allowing me to meet with you to explore, through a semi-structured interview, your experiences of PD as a Social Care Work graduate, having undertaken SCW PEP and also having supervised SCW learners during their PEP. There are no right or wrong answers, the questions are based on your experiences, thoughts and understanding of PD as it related to your learning and now your practice.

Your participation, if you consent and then having received the interview guide, involves allowing me to interview you. It is anticipated the interview will require approximately 15-30 minutes of your time.

To protect your identity, you will be required to choose a pseudo name on the day of your participation.

With your permission audio recording devices will record interviews in order not to rely solely on memory and to avoid inaccuracies.

All data will be stored immediately following collection in a locked drawer in my office and I have the only key which will remain with me. The audio recorded interviews and transcripts will be stored in a password protected PC folder. Any hard copies of transcripts will either be in my possession at all times or locked in a drawer in my office until such time as the research is graded (+2years to facilitate further writing) and then all files containing data and transcripts will be destroyed and deleted. My supervisors are the only people who may request to see or hear the anonymised data.

I will send you the transcript of your contribution to the interview to ensure accuracy.

Ethical approval has been granted from Trinity College. You are free to withdraw at any time and without explanation or consequence.

Don't hesitate to contact me if you have further questions.

Yours sincerely,

A handwritten signature in blue ink, reading "Geraldine Haugan".

Appendix E: Informed Consent Letters

Consent forms SCW graduates and potential diarist

 Trinity College Dublin Coláiste na Tríonóide, Baile Átha Cliath The University of Dublin maughang@tcd.ie (087)7814883	Ms. Geraldine Maughan School of Education Trinity College, College Green, Dublin2.

Dear XXX,

Thank you for taking the time to learn about my research and complete this consent form.

Your participation, if you consent and then later having received the interview guide, involves consenting to be interviewed, exploring your experiences of PD learning over four years as a Social care undergraduate and now as a Social Care graduate exploring if PD has any relevance to your practice.

If participating in a semi-structured interview you will, at the time of the interview, be invited to keep a PD diary for 10 weeks/10 entries possibly culminating in a brief interview at the end of that time. It is important to note participating in an interview **does not** mean you must keep the diary, this is completely voluntary as is agreeing to participate in a semi-structured interview. Every effort on my part is made to ensure anonymity and confidentiality are upheld. Diary entries will be anonymous email addresses will not be sought for diary entries.

Ethical approval has been obtained from Trinity College Dublin for this study. You are free to withdraw at any time and without explanation or consequence.

To further protect your anonymity and for confidentiality purposes all data will be kept locked and encrypted as appropriate (see information sheet). This research will be conducted in accordance with Social Care and Research ethics best practice guidelines and in a sensitive and non-stressful or judgemental manner.

The Data collected is primarily for the completion of my PhD but may also be used in presentations, conferences and be published. All participants may request a copy of the final results.

Please Tick as Appropriate	Yes	No	Unsure

I have read and understand the content of the attached information sheet			
I might consider keeping a PD diary and subsequent interview around my diary entries			

If you agree to participate in this research an interview guide will be sent to you prior to your involvement. Don't hesitate to contact me if you have any questions or concerns.

Signature of participant

Date

Signature of researcher

Date

Quinn Thompson

Consent forms for PE's

 Trinity College Dublin Coláiste na Tríonóide, Baile Átha Cliath The University of Dublin maughang@tcd.ie (087)7814883	Ms. Geraldine Maughan School of Education Trinity College, College Green, Dublin2.

00/00/00

Dear XXXX

Thank you for taking the time to learn about my research and complete this consent form.

Your participation, if you consent and then later having received the interview guide, involves consenting to be interviewed, exploring your experiences of PD learning over four years as a Social care undergraduate and now as a Social Care graduate and PE exploring if PD has any relevance to your practice and in your role as a PE.

Ethical approval has been obtained from Trinity College Dublin for this study. You are free to withdraw at any time and without explanation or consequence.

To further protect your anonymity and for confidentiality purposes all data will be kept locked and encrypted as appropriate (see information sheet). This research will be conducted in accordance with Social Care and Research ethics best practice guidelines and in a sensitive and non-stressful or judgemental manner.

The Data collected is primarily for the completion of my PhD but may also be used in presentations, conferences and be published. All participants may request a copy of the final results.

Please Tick as Appropriate	Yes	No	Unsure
I have read and understand the content of the attached information letter			
I agree to participate in an interview			

If you agree to participate in this research an interview guide will be sent to you prior to your involvement. Don't hesitate to contact me if you have any questions or concerns.

Signature of participant

Date

Signature of researcher

Date

Geraldine Maughan

Appendix F: SCW Beginnings, Legislation Policy and Reports from 1900's

The history of SCW's can be found in the foundation of religious charities as early as the 18th century and the rapid expansion of religious communities. Charities for children and women were being established in the late 1700s (Skehill, 1999a). The first known Catholic residential institution for children, Teresa Mulally's orphanage in Dublin, was established in 1771 (Corish, 1984).

During the early 1800s, Catholic institutions increased rapidly as the number of religious communities in Ireland expanded. In 1800, there were 120 nuns in Ireland, and by 1900 this number had grown to 8,000 (Skehill, 1999a). This resulted in the establishment of hospitals, schools for poor children, orphanages, reformatories, industrial schools, Magdalen laundries (Inglis, 1998), and care homes for the elderly, as well as a range of other services for the sick and poor. From the mid-19th century, three female religious congregations (the Sisters of Mercy, the Irish Sisters of Charity, and the Daughters of Charity) led the development of new orphanages and the appropriation of existing orphanages. Existing orphanages had encouraged the fostering of children, whereas the Catholic organisations favoured a system where children remained within institutional forms of care. This institutional approach to child care was justified on the basis of financial efficiency, but it also allowed the religious orders to have maximum control over the moral and physical welfare of the children (Raftery and O'Sullivan, 1999; Buckley, Skehill and O'Sullivan, 1997). Three types of institutions for children were developed from the industrial schools (for children whose parents were deemed by the State as being unsuitable or unable to care for them); orphanages (for children of 'good character and respectable families'); and reformatory schools (for children who had committed an offence).

In the mid-19th century, the care and welfare needs of children usually resulted with placement in institutional care (Buckley, Skehill, and O'Sullivan, 1997). Three types of institutions for children were developed from the mid-nineteenth century: industrial schools (for children whose parents were deemed by the State as being unsuitable or unable to care for them); orphanages (for children of 'good character and respectable families'); and reformatory schools (for children who had committed an offence). Between 1858 and 1969, a total of 15,899 children were committed to

reformatories. By 1969, there were still 31 industrial schools detaining approximately 2000 children. In 1970, 1,700 children were accommodated in 42 orphanages with substantial numbers of children also detained in the reformatories. At the beginning of the 20th century, there were 8,000 children detained in industrial schools.

Until the mid-1960's, there was a dearth of legislation or policy since the 1908 Children Act. A glimmer of positive change became observable following the publication of four major reports which critically evaluated the current care systems. These were the Tuairim Report (1966): *Some of our Children*; the Report on the Committee of Enquiry into Reformatory and Industrial School's System The Kennedy Report (1970), followed by the Task Force on Child Care Services (1980). Tuairim Report: *Some of our Children* (1966) main recommendations included that alternative small units should operate with pseudo parents rather than guards. It also recommended relevant training for the workers involved, with an emphasis to be placed on holistic care, which encompassed physical, psychological and emotional needs. In 1967, as a response to the Tuairim report, the Irish Government set up a Committee to carry out a survey of Reformatory and Industrial Schools under the Chairmanship of District Justice Eileen Kennedy. The terms of reference of the Committee were "to survey the Reformatory and Industrial Schools systems and to make a report and recommendations to the Minister of Education" (Hart, 1970, p. viii). Preparing the report, all 3 Reformatories and 31 Industrial Schools still in existence were visited. These institutions at the time were caring for approximately 2,200 children. The remarkable decline in the number of applicants to religious orders and the detection of child abuse in residential homes run by Catholic organisations resulted in the rapid withdrawal of the Catholic Church from the provision of social care services around the late 20th century. The Department of Education were funded by the Church to provide educational services to children residing in those residential homes. According to Clancy (2005), "...the most distinctive feature of the Irish educational system is the level of church involvement and control" (p. 86). These organisations were largely replaced by what was then termed Health Board residential homes, a variety of non-profit residential organisations funded by the State, as well as new systems of foster care.

May 11th, 1999 saw the Irish Government, through the press, issue an apology on behalf of the state to those who had been placed in Industrial schools and suffered

unconscionable abuse. Whether coincidentally or not, the apology was issued on the final week of a three-part Irish TV documentary, "States of Fear", which highlighted the levels of all types of abuse experienced by many of the children residing in Industrial schools across the island of Ireland (Raftery and O'Sullivan, 1999, P. 1), with the Artane Industrial School in Dublin at the centre of one of the largest child sexual abuse investigations in the world. On February 26th, 1996 the Irish national television service RTE broadcast "Dear Daughter", a film with past pupils from Goldenbridge, an Industrial School in the 1950's and 1960's, re-enacting for the camera in the original setting their stories of the cruelty and the violent punishments which they claimed to have experienced whilst living there. The disclosure of the brutality that was perpetrated upon helpless children by nuns in Goldenbridge raised more profound questions about the role of the church in institutional abuse of children "and the legacy of child care services in this State...Vitaly important questions also arise about public accountability and what is being done today to prevent such institutional abuse" (Ferguson, 1996, p. 18). Following the government's apology to those who suffered abuse in institutional care and the TV documentary "States of Fear", the Report of the Commission to Inquire into Child Abuse, known as the Ryan report (2009) was commissioned.

Kilkelly (2008) notes inquiries into abuse can be divided into three categories; abuse within the family setting; institutional abuse; and clerical child abuse. Further divisions are notable according to geographical locations (Kilkelly, 2012). Two major inquiries were carried out into the abuse of children in families, namely the 'Kilkenny incest investigation' (McGuinness, 1993) and the 'Roscommon child care case, report of the inquiry team to the HSE' now known as Tusla (Gibbons, 2010). Child abuse in institutions run by the religious congregations for the state was investigated and reported upon in the "Commission to inquire into child abuse" (Ryan, 2009), with three inquiries conducted into clerical abuse: the 'Ferns Report' (Murphy, Buckley, Joyce, 2005); the 'Report into the Catholic archdiocese of Dublin' (Commission of Investigation, 2009); and the 'Report into the Catholic archdiocese of Cloyne' (Commission of Investigation, 2011).

1908: The Children Act: remained the principal legislation on children and young people in Ireland until the Child Care Act 1991, which was not fully operational until 1997.

1941: The Children Act, 1941: amended the 1908 Children Act and required a court appearance when decisions were sought for children under 17 years, referred to as "Juvenile Courts".

1952: Adoption Act: Legal adoption was introduced to Ireland in 1953 after a long struggle with strict adherence to the Irish Constitution. They argued that Article 42 guaranteed that the family, through marriage, shall hold "inalienable and imprescriptible rights, antecedent and superior to all positive law" .

1961: The Probation and Welfare Service were established.

1963: The Juvenile Liaison Officer Scheme was established within the Garda Siochana (the Irish Police Force).

1964: Adoption Act 1964: this Act up-dated previous legislation.

Guardianship of Infants Act 1964,

1966: Tuairim Report "Some of Our Children" published.

1967: Donough O'Malley, Minister of Education introduced 'free' post-primary education. He also appointed District Justice Eileen Kennedy to report on Reformatory and Industrial Schools.

1970: The Kennedy Report was published. Its principal recommendations have been explored in "Reforming the Industrials Schools" above.

1971: Health Act 1970: this legislation created eight regional Health Boards.

1974: Government appointed Task Force on Child Care Services to advise on reform and draft a new Children's Bill.

1981: Task Force on Child Care Services publishes its final Report.

1985: Child (Care and Protection) Bill was published.

1988: Child Care Bill, 1988 superseded above Bill.

1989: The Status of Children Act, 1989 (which removed the status of illegitimacy) and

1991: Child Care Act which was fully implemented by 1997 and has been described as the 'most significant piece of child care legislation since the foundation of the state' (Department of Health and Children, 2003)

1999: Social Services Inspectorate (SSI) was set up in 1999 to inspect social services in Ireland. The SSI introduced national standards for children's residential centres and special care units in 2001, and for foster care in 2003. The inspectorate emerged from the recommendations of the Report on the Inquiry into Madonna House, which reported in May 1996 and recommended that an Inspectorate of Social Services be established on a statutory basis, which would have responsibility for 'quality assurance and audit of childcare practice in all areas of personal social services, including the children's residential sector.'

2000: National Children's Strategy 2000, Our Children: Their Lives – A cross government approach to children with three national goals identified: give children a voice in matters that concern them; improve understanding of their lives; and provide quality support and services.

2001: Children's Act, 2001 – provides the legislative basis for dealing with children found in breach of the law. Children should only be detained as a last resort.

2002 :The Ombudsman for Children Act, 2002 – Established the statutory office of the Ombudsman for Children in Ireland. To promote the rights and welfare of children and investigate complaints from children and young people. The National Standards for Residential Care Services (2002) and the National Standards for

2003: Foster Care Services (2003) were developed to guide the provision of services in these two key areas. A children's version of the foster care guidelines, The Children's Book About Foster Care was also published in 2003.

2006: State of the Nation's Children Reports – provides biennial reports to Government on key indicators of children's wellbeing since 2006. Reports are produced by the special rapporteur for children.

The establishment of the Office of the Minister for Children and Youth Affairs in 2004 which led, in 2011, to a full Department of Children and Youth Affairs (DCYA) with its own Minister for the DCYA.

2011: Children First National Guidance, 2011 – To promote the safety and well-being of children. To assist in identifying and reporting child abuse and neglect and deal effectively with concerns. Children First: National Guidance for the Protection and Welfare of Children (Department of Children and Youth Affairs, 2011) and in the Child Protection and Welfare Practice Handbook (HSE, 2011b) (Tusla.ie).

2011: National Strategy for Research and Data on Children's Lives 2011-2016 – To coordinate and mobilise research and data across important bodies in order to achieve better outcomes for children.

2011: Review of Adequacy for HSE children and family service (HSE, 2011:92) - acknowledged an increasing awareness of deficits in the care being provided to vulnerable children and their families by the State. A number of reports that have highlighted poor governance and accountability arrangements culminating in inadequate performance management and inconsistent policy and practice.

2012: The passing of 'The Children's Rights' referendum in November, 2012 (the result of which was challenged to the Supreme Court of Ireland) and the Court's decision to uphold the referendum result. Article 42A.1 is now inserted into the Irish Constitution. The main principle of this article is that the standard of protection of all children will be improved under law. which 'provides, for the first time, a specific affirmation of rights and protections to be enjoyed by children as children' (DCYA, 2015:27).

2013: Child and Family Agency Act, 2013 – Brings together a range of existing children's services into one key agency – The Child and Family Support Agency.

2014: Better Outcomes, Brighter Futures – The National Policy Framework for Children and Young People 2014-2020 – to co-ordinate policy across government departments with five National Outcomes and identify areas where improvement is needed for children and young people up to age 24 years. This document has as its main guiding principle the UNCRC (1989).

2014: Children First Bill, 2014 – Places the Children First Guidelines on a statutory footing. The Child and Family Relationships Act 2015 – gives effect to the Constitutional change resulting from the 2012 Children's Referendum and includes a provision for children's views to be ascertained in private family law matters.

2015: The National Strategy on Children's and Young People's Participation in Decision making 2015-2020 – the goal acknowledges 'the importance of children and young people having a voice in decisions that affect their lives' as being 'integral to all five outcome areas' specified in Better Outcomes, Brighter Futures 2014-2020. (DCYA, 2015 p. 2).

2015: The implementation of the Children First Act, 2015, which aims to increase awareness of child protection in organisations and includes mandatory reporting for certain professional groups.

2015: The Child and Family Relationships Act, 2015 has given effect to the Constitutional change, this law will ensure that the views of children capable of forming their own view will be heard in proceedings concerning them, including in relation custody and access following parental separation.

2015: Assisted Decision-Making (Capacity) Act 2015 provides for the reform of the law relating to persons who require or may require assistance in exercising their decision-making capacity, whether immediately or in the future. It also provides provide for the appointment by such persons of other persons to assist them in decision-making or to make decisions jointly with such persons; to provide for the making of applications to the Circuit Court or High Court in respect of such persons, including seeking the appointment by the Circuit Court of decision-making representatives for such persons.

Appendix G: Child Abuse Investigative Reports

Investigative reports into Child Abuse include

- ◆ Kilkenny incest case 1993
- ◆ Kelly Fitzgerald Case which had been completed on behalf of the Western Health Board in early 1995 but was not published for legal reasons. Kelly Fitzgerald was the eldest child of an English couple who had died at the age of 15 in a London hospital in 1994 following years of physical and emotional neglect in Ireland by her parents.
- ◆ Newtown House-Formerly known as Trudder House, the centre first came under the spotlight when allegations were made by former residents that they had been sexually and physically abused while resident there.
- ◆ Madonna house was Dublin's largest and best known residential children's centre until its closure in 1993 on the recommendation of a board of enquiry conducted by the Sisters who managed the facility. A handyman employed was subsequently convicted following the allegations of sexual abuse by 15 girls resident in Madonna House. The resident manager, a religious Sister, was suspended and criticised at the time for not being aware of the situation. The Madonna House Report was not published in full, on the advice of the Attorney General, principally because it might prejudice future criminal proceedings.
- ◆ Goldenbridge-was Dublin's largest and best known residential children's centre until its closure in 1993 on the recommendation of a board of enquiry conducted by the Sisters who managed the facility. A handyman employed was subsequently convicted following the allegations of sexual abuse by 15 girls resident in Madonna House. The resident manager, a religious Sister, was suspended and criticised at the time for not being aware of the situation. The Madonna House Report was not published in full, on the advice of the Attorney General, principally because it might prejudice future criminal proceedings.
- ◆ Leecross report- can't remember this one?
- ◆ The Ferns Inquiry – 2005. The Ferns Inquiry was set up in March 2003 to investigate allegations and complaints of child sexual abuse by members of

the clergy in the Diocese of Ferns and to consider the appropriateness of the response of the Church and state authorities to these complaints.

- ◆ Ryan report 2009; The Ryan Commission was the state's largest inquiry into the abuse of children in institutional care
- ◆ Roscommon child care case, The Roscommon Child Care Inquiry, published in 2010, examined the failure of the authorities to intervene effectively in the lives of children who suffered inexcusable abuse and neglect at the hands of their parents (Gibbons, 2010). Similar to Kilkenny incest case, The Roscommon Child Care Inquiry, published in 2010, examined the failure of the authorities to intervene effectively in the lives of children who suffered horrendous abuse and neglect at the hands of their parents (Gibbons, 2010).
- ◆ Aras Attracta, 2015, HSE/McCoy report in to Centre 2, Bungalow 3, "found the model of care at Áras Attracta to be wrong. The model did not respect the residents as individuals. They have suffered isolation and institutional conditioning. There was an assumption that the residents could not contribute and do things for themselves: they have been unable to reach their potential. The residents have had a poor quality of life, and their voices have not been heard. "To move on from this report, services for people with intellectual disability must be person-focused and needs-based.

Appendix H: LIT's Inception and Governance

LIT operates under the Institutes of Technology Acts 1992 to 2006 and complies with the Qualifications and Quality Assurance (Education and Training) Act 2012. The Institute traces its origins back to 1852, when the Athenaeum Society opened a School of Arts and Crafts in Limerick. An international quality review of LIT in 2010 described LIT as a mature higher education institution with excellent quality assurance.

The Institute has over 6,500 learners (over 5,000 full-time) and provides a wide range of programmes spanning the areas of Applied Science, Engineering and Technology, Art and Design, Business and Services, Humanities, Built Environment and Rural Development.

National Strategy for Higher Education to 2030 - Report of the Strategy Group under The vision for higher education in Ireland The following high-level system objectives will underpin the realisation of this vision: "Students will experience an education that is excellent, relevant and responsive to their personal development and growth as fully engaged citizens within society" (2011, p. 27). The report goes on to say the HE system has "opened new opportunities for personal development and advancement to a generation of citizens" (2011, p. 29). And finally "Research also informs the curriculum for undergraduates – the exposure of all students to the passion and insights of research-active academic staff can be a special force for personal development and creativity" (2011, p. 63).

Process and Criteria for Designation as a Technological University. Introduction The National Strategy for Higher Education provides for the establishment of a new type of university – a technological university. A technological university will have a systematic focus on the preparation of graduates for complex professional roles in a changing technological world. It will advance knowledge through research and scholarship and disseminate this knowledge to meet the needs of society and enterprise. It shall have particular regard to the needs of the region in which the university is located. Under section 5 Teaching, Learning and Curriculum Development "Curricula that embed the full range of generic attributes linked to employ

Towards a Future Higher Education Landscape Under section 3. Drivers of change. (2012:4)The provision of education and research by Irish HEI's must meet or exceed international standards for quality of outcomes, and this must be done in a transparent manner. If we are to ensure that those who enter our higher education system have a rich

and personally fulfilling experience, then the teaching and learning environment must be of the highest standards. ability and citizenship;" Ireland has a well-developed National Framework of Qualifications (NFQ) that, in conjunction with its outcomes oriented approach to learning, emphasising the development of knowledge, skills and competencies, allows us to build a range of opportunities for creating rich and diverse student pathways into and through our higher education system. No higher education institution can or should attempt to provide the full range of entrance and pathway opportunities for the full range of general, specialist, or labour market oriented programmes of study.

National Strategy for Higher Education recommended significant reform of the institute of technology sector so that it could be better positioned to meet national strategic objectives. In particular, the Strategy recommended consolidation within the sector and a pathway of evolution for a consortium of institutes of technology that would allow them to demonstrate significant progress against stated performance criteria and to apply to become technological universities. Considerable progress has been made by a number of consortia towards achieving this objective. The enactment of the TU legalisation in March 2018, (Technological Universities Act, 2018) sets out a process whereby consortia may now submit an application for TU designation.

Technological Universities CONNECTEDNESS & COLLABORATION through CONNECTIVITY; Report of the Technological Universities Research Network to the Department of Education and Skills (2019). Digital platforms and predictive analytics will also enable TUs to fundamentally transform and deliver programmes designed to meet the personalised education needs of the individual learner, in particular facilitating access and retention for at-risk learners. For TUs, the use of extensive digitalisation will ensure more effective engagement with students and efficient access to contemporary information about the student experience and the success of programme strategies, research quality and impact which, in turn, will mean that TUs can be more responsive in improving and enhancing quality.

The Regional Technical Colleges Act, which became effective from 1 January 1993, broadened the scope of the Institute and allowed structures to be set up to formalise research and development. This Act also increased the autonomy of the Institute, which is subject to a Governing Body, which, through the Chairman and President, is directly responsible to the Minister for Education for the work of the Institute.

LIT Strategic Plan 2018-2022, and the HEA Mission Based Performance Compact 2018-2022, are the key parallel drivers of the strategic, tactical, and operational plans that will shape LIT's educational development and activities in the immediate future. LIT's plans

and results will be underpinned by its core values of excellence, innovation, equity, support, and accessibility.

<http://staffportal.lit.ie/RegistrarsOffice/QualityTeachingLearning/TeachingLearningdefault.aspx> The strategy has eight higher-level principles chosen to guide an excellent system-wide approach to teaching and learning processes throughout the Institute. This strategy is enabled, through nine implementation themes (each with actionable strategic goals). Each strategic goal is designed to ensure that the learning experience for students is engaging and progressive and; that teaching staff are supported as teaching and learning professionals to update their knowledge and skills as educators. The profile of the national and international context for teaching and learning suggests a common theme throughout "the development of full human potential through an agenda of innovation and excellence in teaching and learning" LIT's strategy working groups.

The BA (Hons) in Social Care Work and the BA in Social Care Work have been very successful programmes here at LIT since their inception in 2003. It is especially envisaged that demand for this programme will increase with the incoming professionalisation movement in the sector, with all social care workers being required to register with the Social Care Workers Registration Board. CORU (Health and Social Care Professionals Council) is the body responsible for regulating health and social care professions established under the Health and Social Care Professionals Act, 2005. CORU's role is to protect the public by promoting high standards of professional conduct, professional education, training and competence amongst Health and Social Care professions Registration for Social Care Workers, once opened, will require that any individual wishing to use the title of "Social Care Worker" will be legally required to register with CORU.

The requirements of CORU may limit the amount of places to ensure quality supports, assessment and high standard of appropriate placements are offered to our students, which will only serve to increase demand.

Appendix I: Adverse Childhood Experiences (ACEs)

Adverse Childhood Experiences (ACE) scale has become a popular tool among researchers and advocates concerned about long term effects of childhood trauma.

The ACE scale assesses early experiences like physical abuse, neglect and sexual abuse.

The ACE study was conducted between 1995 and 1997 among a sample of over 17,000 people.

The study focused on 10 types of childhood trauma that have a critical influence on a child's life:

Physical abuse

Sexual abuse

Emotional abuse

Physical neglect

Emotional neglect

Mother treated violently

Substance abuse

Household mental illness

An Adverse Childhood Experiences (ACE) study carried out in the US found that one adverse event may lead to another. This study of over 17,000 people found that 87% of respondents who had been exposed to one type of adversity reported being exposed to at least one other type of adversity.

Appendix J: SCW Curriculum

Semester 1	Semester2	Semester3	Semester 6	Semester 7	Semester 8
Principles & Practice of Social Care (3+1)	Principles & Practice of Social Care (3+1)	Principles & Practice of Social Care (3+1)	Professional Development (2+1)	Legal Studies (2+1)	Legal Studies (2+1)
Active Citizenship & Volunteering	Psychology (3+1)	Psychology (3+1)	Psychology (2+1)	Psychology (2+1)	Psychology (2+1)
Personal Development1 - An Introduction to the process of Personal Development (2+1)	Personal Development Identity and groups (2+1)	Personal Development Family and Self-esteem (2+1)	Personal Development Assertiveness (2+1)	Personal Development Life Story Facilitation Loss & Grief Sexuality (2+1)	Personal Development Life Story Facilitation Loss & Grief Sexuality (2+1)
Health & Home Mgt (3)	Sociology (3+1)	Sociology (3+1)	Sociology and Diversity (2+1)	Sociology (2+1)	Sociology (2+1)
Learning to Learn (3)	Creative studies (2+1)	Legal Studies (2+1)	Research Methods (2+1)	Research Thesis	Research Thesis
Choose 1 of the following Electives: Introduction to Working with: Vulnerable Young People Disability	Choose 1 of the following Electives: Introduction to Working with:	Choose 1 of the following Electives: Introduction to Working with:	Professional Ethics (2+1)	Choose 1 of the following Electives - Addiction Studies - Working with Challenging	Choose 1 of the following Electives - Addiction Studies - Working with Challenging

Semester 1	Semester2	Semester3	Semester 6	Semester 7	Semester 8
Homelessness	Vulnerable	Vulnerable		Behaviour -	Behaviour -
The Elderly	Young People	Young People		Advanced	Advanced
Residential	Disability	Disability		Working	Working
Child Care	Homelessness	Homelessness		with	with
ICT (2)	s	s		Vulnerable	Vulnerable
	The Elderly	The Elderly		Young	Young
	Residential	Residential		People	People
	Child Care	Child Care			
	ICT (2)	ICT (2)			

The contact time with learners is represented in the table below by the numbers in brackets following the module title,: the first number in the bracket is the hours of lectures and +number denotes the tutorial or group hour. An updated curriculum was mapped to CORU's SoP but the curriculum under discussion closely resembles the curriculum all the participants had experienced save for elective choice, professional development modules and semesterisation (new developments since 2015), PEP which at the outset had been initially over 3 semesters, then over 2 semesters with a semester in college between PEP's and now in recent years PEP is experienced over the last semester of 2nd year and 1st semester of 3rd year.

Appendix K: Twenty-Nine PD LO's

LEARNING OUTCOMES FOR PD (Semester 4 and 5 Work Placement)

PD YR 1 Semester1	PD YR 1 Semester 2	PD YR 2 Semester 3	PD YR 3 Semester 6	PD 4 Semester 7 & 8
1. Explain the general theories and concepts underpinning the process of personal development and how it impacts on working with people they support.	1. Examine the main theories underpinning the knowledge of 'self'	1. Demonstrate an increased level of self-awareness gained and be able to integrate and apply this learning into their work as professional social care practitioners.	1. Interpret the terms Assertive and Non-Assertive.	1. Demonstrate an increased level of self-awareness and reflection and the ability to integrate this learning into work with people as professional social care practitioners.
2. Outline the process and practice of interpersonal experiential group work.	2. Identify the 'self' as a multifaceted entity	2. Demonstrate an awareness of the theories, skills and practice of Group work.	2. Evaluate the various theories of Assertiveness, comparing and	2. Actively participate in group work through creative expression, group participation, and group facilitation.

PD YR 1 Semester1	PD YR 1 Semester 2	PD YR 2 Semester 3	PD YR 3 Semester 6	PD 4 Semester 7 & 8
3. Participate and manage the process of engagement in PD processing weekly experiential group work sessions. 4. Identify and demonstrate, through the medium of reflective writing, an increased level of self-awareness in relation the personal and professional self. 5. Engage in the process of meditation practices and mindfulness	3. Explore the themes of self-awareness and self-in-relationship 4. Define and develop the concept of the 'self' in working with people they supporting social care Practice	3. Demonstrate an awareness of the dynamic of the experiential group process. 4. Outline key theorists in family systems theory and family of origin work .	contrasting each one. 3. Evaluate the various viewpoints on the various reasons for being Assertive/non-Assertive. 4. Examine key theorists who have influenced the area of Assertiveness.	3. Demonstrate critical awareness of the dynamics of experiential group process. 4. Apply models of key theorists in the fields of loss, bereavement and recovery.

PD YR 1 Semester1	PD YR 1 Semester 2	PD YR 2 Semester 3	PD YR 3 Semester 6	PD 4 Semester 7 & 8
	5. Participate and manage the process of engagement with personal development in weekly group work sessions 6. Practice reflective writing skills on a weekly basis while maintaining a	5. Define self-esteem, its origins and influences within the family. 6. Give and receive feedback to peers within a framework of self-awareness activities.	5. Critically examine the arguments surrounding self-development and Assertiveness. 6. Demonstrate the skills of being Assertive within a Social Care context.	5. Explore the application of major human sexuality models to various contexts. 6. Plan for self-care activities for future personal and professional development.

PD YR 1 Semester1	PD YR 1 Semester 2	PD YR 2 Semester 3	PD YR 3 Semester 6	PD 4 Semester 7 & 8
	reflective journal			

Appendix L: PD Curriculum and Assessment to Meet PD LO's

Below is the outline of the PD curriculum across the four years of the SCW programme.

Year 1	Self- awareness	Reflective journal writing	Contemplative pedagogies
Year 2	Family relationships	Semester 4:PEP.	
Year 3	Semester 5:PEP	Assertiveness & non-assertiveness	
Year 4	Self, reflection, group dynamics & facilitation.	Use of self	Loss, life story & sexuality

Below is the outline of the PD Assessments to meet the PD LOs

Year 1
Semester 1:Reflective journal; End of semester summary (20%) Submission of reflective journal (30%)
Semester 2; Group work; Group presentation with group assessment and analysis 30%
Self-assessment of participation and engagement in group process during the year 20%
Year 2
Handmade 3 generation genogram with discussion and analysis of 3 emotional, physical, life event or family dynamic patterns noted when completing the project. (50%)
What have you learned about the concept of "the family"? How did this exercise contribute to your understanding of self and your personal development? (50%)
Year 3

A book or literature review on the work of one theorist /book covered in PD. The main themes of assertiveness and communication in that theorists/authors work are examined and critically analysed both in terms of overall usefulness and how they compares with their own overall personal development this semester. (2000 words max). (60%)
From journal entries a 2,000 word reflective and analytic summary is required, noting interactions with the themes of assertiveness and communication over the semester, in PD, with particular emphasis on their relationships with others in relation to assertiveness. (40%)
Year 4
Critically analyse the usefulness of one model/theory of grief for understanding loss in the human experience as SCW's (1500 words) (25%)
2 (a) Group members co-facilitate a PD session and each group member writes an individual group facilitation essay incorporating the feedback from a peer and facilitator. (1000 Words) (60%)
2 (b) a reflective and analytical summary of patterns, themes or issues and resolutions from journal entries from group/lecture, with liberal use of extracts from journal entries matched to relevant literature, (1000 words) (15%)

Appendix M : PEP Learning Outcomes PEP 1 and PEP 2

Learning Outcomes On completion of PEP 1 the learner will/should be able to

1. Demonstrate an understanding of personal and professional issues regarding placement preparation.
2. Complete a structured and monitored placement in an approved social care/community placement provider.
3. Communicate effectively in relatively straightforward situations with service users and colleagues while being cognisant of the status of student.
4. Demonstrate an understanding of professional boundaries and the relevance of seeking advice and direction from management.
5. Develop an ongoing awareness of the needs of services users and how the agency practically addresses these needs.
6. Demonstrate critical, self reflection in practice and be able to discuss such issues in the context of professional supervision.

Learning Outcomes On completion of **PEP 2** the learner will/should be able to

1. Prepare for the personal and professional challenges inherent in the practice placement.
2. Identify specific personal and professional learning objectives
3. Complete an structured and monitored placement in an approved social care agency
4. Plan, implement and evaluate a supportive intervention with a service-user under the guidance of a supervisor

5. Reflect on the personal and professional strengths and weaknesses which emerged while working on placement and plan to address them.
6. Apply relevant skills and knowledge to supporting service-users in a team context.

Appendix N: Findings Matching PD's LOs

Another part of the analysis was to discover if the findings align, misalign to, or surpass the PD module LO's. Twenty-nine LO's were condensed to eleven LO's, encompassing all four years of PD. The decision to discover if the findings rather than generated data align, misalign or surpass the PD module LO's was two-fold. Firstly, to avoid conscious or unconscious bias asserting itself in the midst of matching data to the LO's and, secondly, matching the findings to the LO's seemed more robust, as the findings are the result of rigorous analysis.

Twenty 29 learning outcomes from the four years/six semesters of PD discussed under curriculum in chapter three, sections 3.4.1 and 3.4.2, were reduced to eleven learning outcomes as outlined below;

- Family Work and Theorists
- Personal and Professional self through Reflective writing/Journaling
- Participation in Group work through various mediums
- PD Theories
- Increased Levels of Reflection
- Increased Self-Awareness for Practice
- Engagement in Mindfulness and Meditation Processes
- Self Esteem
- Sexuality Models
- Interpret and Practising Assertiveness/Non Assertiveness and its Theories
- Understanding Facets of Self

All the LO's are demonstrated to have been met numerous times within the SCW graduates and PEP supervisors quotes, demonstrated below with various quotes from SCW's and PEP supervisors. Sex and sexualisation is only directly referenced once by Maria a PEP supervisor.

Family Work and Theorists

Sixteen SCW participants discussed the family element of PD and its relevance to them personally, five participants discussed the transferability of family from PD to their practice as can be discerned from the two quotes below.

I think even in past PD modules I am looking at those roles in the family and the people that take on the joker and stuff. And people having masks... I think you need to take into account those little things like that do pop into your head and you do kind of think about it... You take it in but it's not until you get into a working situation when you actually put the PD stuff into practice (Cathy)

I use it on a personal level anyway now because of my experiences over the years through college and the changes and I can see after this and relevant to this and at the end of the day I'm a youth worker or a youth and family worker and I'm going in trying to facilitate positive change in families now then if I can't facilitate a positive change in myself then how can I expect families and young people to change the change for me then either so yeah it is a big part for me in work (Si)

Personal and Professional self through Reflective writing/Journaling

Journaling was mentioned by SCW participants both in relation to reflective practice and supervision. Similarly, PEP supervisors noted SCL's preparedness for supervision and the effective use of journaling. Since completing PEP some participants noted how to this day they continue to journal about their day and feelings and emotions.

...When we do our journals and that, I think that reflective piece is so important. At the time you're thinking, "This is ..." You know what I mean? It sometimes can feel very monotonous or repetitive, but it allows you ... The more you reflect, I think the more you learn. And the more you can pull the things from it. Like why did I react that way? It stops you from reacting. It leads you into grounding, I suppose, that little bit more. (Louise)

Students with PD, like I said, they have better self-awareness, and just, let's say, I can give them constructive criticism, and they take it onboard. They don't become defensive, because they know they need to analyse, and even they're more up to the idea of having a little notebook and writing down if they had a bad day, I say to them, write it down, then we can discuss that in the supervision.

... And, I've been doing this when I was in placement, I had a little notebook and I was writing down my emotions, my feelings, and I was working through that. (Bella)

Participation in Group work through various mediums

Every participant participated in group throughout the years, what was important was the level of engagement and the level of comfort to engage with PD as the two quotes below affirm.

But then as the years went I got more confident in talking about the different things and I found it more useful. And hopefully even in the future the skills and stuff to be able to bring them along 'with you

... I suppose, the group work was a big part of it and how you can bring that into future jobs and stuff. How personally then that you become more comfortable and more confident and more, I suppose, there was a few different things... . (Pippa)

...and I know if it's the way the groups were ran or what way it worked for me but it allowed me to do things in my own time I wasn't rushed into anything may have taken four years to actually come around (John Ryan)

PD Theories

PD theorists/theories are mentioned a few times across both sets of participants. Rogers, Kolb and Satir were mentioned most frequently. Also mentioned was the genogram, the Johari window, river of life, life stories, family dynamics, reflective practice and theories of loss and grief,. As the following two quotes demonstrate.

The genogram. That feels like an easy exercise and then you know brings up stuff, or the loss and grief and inevitably you've got to go through. Then you start to recognise the types of loss that you might've experienced even though it might not have been death. There's a lot of stuff. I think there was a very really strong feeling of a life cycle through the modules we did and the different main areas. (Emma)

I did a personal development thing, always trying to bring it back into how you were

I did (a meditation practice) one around grief and loss because we were actually doing a module on that anyway throughout the year, and it was actually really empowering. It was very helpful for me, and the feedback I got. So every so often when I notice people are going through something I'll utilize that and the grounding as well (Kim Kardashianardashian)

Increased Levels of Reflection

Thirteen SCW participants directly link Reflective Practice from PD to Reflective Practice in their Practice. . Managing loss and grief and gaining confidence and

grounding are recalled by PEP supervisors from their PD learning. Acquiring these attributes have culminated in habitual reflective practice (RP) before and after engaging with others in practice as the two quotes below attest.

...yeah I suppose it (PD) does feature for me anyway I suppose I bring it into my work quite a lot I mean in terms of reflection

...for me it is everyday as much as you can even after every session before or especially even some of the cases that you would be working on a mean some of them can be very intensive and ...just sit down and saying right this is what's going on for me thinking about how the last session went what could I do better next time what you know all the different things by the signals that the give you just reflecting on things before you know preplanning planning and then afterwards and how can you do better and try implement it and some of the kids they do take part in some of that what went well and stuff it works you know

...I had to use my PD to reflect on it and thought okay maybe I could have done something better there even though I felt I was right and I was but maybe I could have perhaps looked more at respect authority at the same time you have to question it (Si)

But I just think even, like through PD or reflection, this is kind of where you kind of learn, so to look at it even from the outside, I can imagine it would benefit because, if you're having an interaction, you are reflecting back, you're thinking back. You're going to learn from that, so the next person you meet is going to benefit from that process. (Jenny)

Increased Self-Awareness for Practice

PEP supervisors were best placed to observe the presence of self-awareness in SCL's/SCW's practice and a diary entry from a SCW confirms PD assisted them to recognise self-awareness as the following two quotes demonstrate.

I'd nearly go with somebody who's learned PD because it means you've a certain amount of work done on yourself. Particularly if you've had PDGs, you have an awareness. And it's through being aware of our own experiences, that allows us to empathise with people and their experiences. And safeguards you as well, it's like, do you know your limitations and your boundaries? (Aoife)

Pd helped to recognise self awareness and when i need supervision and when i need to undertake self care the most. (Anon)

Engagement in Mindfulness and Meditation Processes

PD taught respondents to be self-aware and recognise when depleted and to implement mindfulness and meditation techniques for self-care purposes as the two quotes below explain.

Always (thinks about PD) before I go in to homes and after I come out of the homes I use the meditation and reflection.

... I found that when my anxiety started to rise, by doing the meditation and grounding myself. It really helped me and I do it sometimes.

... Two things I still carry with me to this day. Yeah, 100% very good. (Guinevere)

He (young person) did some meditation as well when you were doing it he'd actually copy what you were doing so it did work (Mary)

Self Esteem

Confidence seemed to be the term participants employed reciprocally with self-esteem. Eleven SCW participants describe how PD assisted them with their confidence building and how this transferred to their practice. This is demonstrated by the two quotes below.

in the beginning very quiet low confidence shy shy person that couldn't open their mouth didn't, always knew they had it in them but just couldn't get the words out and didn't know how to finish but can't shut me up now-ha ha ha. (Ann)

...I'm starting a new job soon and I do feel like I have the confidence now of actually I'm coming in and I have my experience that will come with me.

...Which before I would have shut my mouth, just got on with the job and tried to figure things out.

... Whereas now I'll ask everything and I feel like, do you know that, at team meetings and stuff like that that I can speak up.

... that was definitely due to the PDGs. Like I feel like I kind of gained my confidence in them groups. Like it was a big difference from the first to fourth year.

... It's just like my confidence in so many areas has grown. But I think like if there's something in your life that's holding you back, all of the other areas though suffers. And I think I've kind of noticed that if you can get I suppose, the most important part for life right, Whether it's work or do you know what I mean (Louise R)

Interpret and Practising Assertiveness/Non Assertiveness and its Theories

Eight SCW participants mention assertiveness from PD and its application to their practice which is indicated by the following two quotes

...I mean we did cover assertiveness in PD so I kind of even thought at the time I didn't think I was learning, it did kick in

...I know where that come from

in the work I'm doing now at the moment you have to be assertive because everything is they want they want the clients just want and want Saying [REDACTED] [REDACTED] [REDACTED] You couldn't even eat your lunch The kind of like [REDACTED] can I get two seconds yeah you have to be like come back at 2 o'clock or whatever I'm on my lunch right whereas before I'm like yeah just come on in and you can be eating your lunch and they'd ask you to do something and then you like push your lunch Aside. then you start working on something for them but I realise it's 5 o'clock lunch is over and its home time

so then I am kind of leaving (PD)...

found myself using more assertiveness (John Ryan)

I was in [REDACTED] training last week and one of the things we discussed was being assertive. I immediately thought of PD when we discussed being assertive. I had an advantage in this discussion as I learned assertive/ assertiveness in Year 3 in PD through our PDG and in the lectures. (Anon)

Sexuality Models

Sex and sexualisation is only directly referenced once and that is .by Maria a PEP supervisor

...Every time. It's very important to be aware of this stuff and how you are in a situation, because things do come up. We have situations every day that involve drugs, that involve family issues, that involve sex and sexualization. It's very important to know where you are with these things, but to be able to try and see it from the other people's perspective. Students with personal development have that. (Maria)

Understanding Facets of Self

Both SCW and PEP participants demonstrated how facets of self were understood. SCW participants observed facets of self within themselves and PEP's observed facets of self within their SCL's as the final four quotes for this section confirm.

Being able to take myself out of a situation emotionally and make a decision about an SU based on their needs over my own emotional response. (Anon)

I was a mess, I was so vulnerable. My second year placement, my personal life was just a mess, it was just an absolute mess. I think I had been [REDACTED] and everything, it was a disaster, and I broke my [REDACTED]. I got through that ..., but going into my third year placement, I should not have been there. I really and truly should not have been there.

you have to find positives in everything. There was a massive positive in it because I actually had to look and accept, actually I'm the vulnerable one. Actually, I need help, I need support. I had no business going out and working with people because actually, all I was thinking about is my own stuff and my own issues.

... just how vulnerable I was and just a lot of trauma that I was carrying.

... see do they realize here is that a lot of people choose social care because they're vulnerable themselves

... I was the SU really I was and I was the vulnerable one. Did not have the capacity to support anyone. I couldn't keep myself safe, so how was I going to keep anyone else safe? (Chloe)

when I started PD I thought it was a gimmick to be honest with you. I did.

...I think it wasn't until like half way through 2nd year that I realized or knew how important that actually is and how I was actually, I was getting stuff out of it that I didn't, I was that I was getting revelations and stuff and I think it was like it was preparing me for the real world in a sense that I was getting all my insecurities out when I went into work.

...Then when I started giving more to PD I was getting more from it. I think it was third year that it just kind of all started falling into place. (Guinevere)

You know but I really ... It's not because PD ... the topic is around PD but I do genuinely believe you're at nothing if you're not looking inside yourself. If you coming with your own stuff. And the thing is with social care a lot of us come into the field because we've experienced it in situations because you know ... So, it's super, super important to really develop personally before you go trying to help somebody else. (Jenny).

Appendix O: Preferred Qualities/Proficiencies in SCL's and SCW's

The table below depicts the 84 (some over-lap) qualities sought by SCW employers and PE's when acquiring SCL's for their PEP or to have demonstrated by the completion of the PEP.

<i>Qualities/ Proficiencies</i>	Adaptable	Flexible	Self-Reflective	A degree of confidence
Ask Questions	Non Judgemental	Passionate/ Interested	Non-Biased	Efficient at Relationship Building
Enthusiastic/Eager	Solid in themselves	Know where they're at	Challenge thought processes	Self-awareness
Energetic	Upbeat	Trustworthy	Honesty	Easy going
Compassionate	Supportive	Openness	Active Listeners	Very Empathetic
Groupwork Skills	One-One working	Trust	Get stuck in	Open Minded
Humanistic Approach	Not Overpowering	People Skills	Somewhat Resilient	Patience
Open to Learning	Proactive	Intuitive	Positivity	RP
Unimposing/Intrusive	Authentic	Speak their Mind	Real	Comfortable
Humorous	Fun	Suitability	Smile	Accept Being Challenged
Some Life-Experience	Not Easily Fazed	Aware of Boundaries	Accept Boundaries Will Be Tested	Know Limitations/Limits

Bring Outside Activities/Skills	A Level of Maturity	Open to/in Supervision	Ability To Process	Share Insights
Person Centred Approach	Approachable	Putting Clients First	Caring Manner	Manage Own Emotions
Walk in Clients Shoes	Motivated	Friendly	Likable	Seek Support
Mindful of Individuals Circumstances	Good Moral and Value Base	Get Out Meet People	Team Player	Good Communicator
Knowledge of the Organisation	Meeting Individual Where They Are At	Ability to Self-Care	Confidentiality	Accepting Supervision as a 2Way Process
Notice Blind Spots/Obstacles	Creative	Start Identifying Strengths	Assertiveness	Confidence in Self/Ability

To put the above table in context, unexpectedly, participants' outlined the most sought and valued qualities for SCL's/SCW's to be adaptability and enthusiasm, mentioned by 13 participants, followed by 12 participants who sought those who exude interest in the work and organisation.

Open-mindedness was alluded to by 10 participants with maturity/cop on mentioned by 9 participants. Compassion, empathetic, active listening and non-judgemental qualities was desired by 8 participants.

Elements of confidence/self-esteem are sought by 7 participants as was the ability for flexibility. RP and trustworthy qualities was favoured by 6 participants. Resilience was desired by 4 participants. Boundaries was mentioned by 3 participants. Finally, assertiveness was directly mentioned by 2 participants but seems to be alluded to when participants explained confidence.

The above are the 16 most mentioned qualities, the other 68 qualities or proficiencies were only mentioned once within the context of employers/PE's desired qualities and proficiencies for SCL's and SCW's. Surprisingly, confidentiality was only mentioned once as a required/desired quality.



Appendix Q – Ethical Approval Letter

Approval Geraldine Maughan

1 November 2016

Dear Geraldine,

The School of Education's Ethics Committee has received and considered your application for approval of your PhD research project.

It is the decision of the Committee that no additional information is needed regarding your application. Therefore, approval is granted for your research, on the condition that it is carried out as indicated on your application. Should there be a change in the design of your research project, you will need to re-apply again for approval from the School of Education's Ethics Committee.

You are required to include a copy of this letter as an appendix to your thesis.

If you have any queries regarding this decision, please contact the Chair of the School of Education's Ethics Committee and Director of Research, Dr Stephen James Minton (mintonst@tcd.ie).

We wish you all the very best with your research project.

Kind regards,

Fiona McKibben

Research Officer at the School of Education

on behalf of Professor Stephen James Minton

Director of Research

3088 School of Education Arts Building

Trinity College Dublin, the University of Dublin

Dublin 2, Ireland.

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3088 Scoil an Oideachais

Coláiste na Tríonóide, Baile Átha Cliath, Ollscoil Átha Cliath

Baile Átha Cliath 2, Éire.

School of Education, Trinity College Dublin, the university of Dublin is ranked in the top 100 in the QS 2016 subject rankings.

Appendix R – LIT's 2014 survey

[Social Care Document as of 17th December 2014.pdf](#)

Appendix S – Examples of MAXQDA codes

Code System		
▼ Code System	7948	
No PD since grad	42	
PD since grad	40	
Mental Health	27	
Behaviour	27	
Personal	52	
Practice	120	
SCW Programme	82	
Changes to SCW	74	
Feeling/Emotions	70	
With/Without PD	73	
PD knowledge V Th...	63	
> Qualities	257	
PD forPractice Educ...	20	
Group	931	
Counselling	29	
Comfortable	120	
Lecture	35	
Open	159	
Vulnerability	31	
Facilitators/Facilitat...	92	
Mandatory	14	
Triggers	55	
Mindfulness/Medit...	38	
Changes for PD	210	
Resilient	68	
Grounding	28	
Journal	20	
First to Fourth year ...	271	
Confidence/Self est...	101	
Confidentiality	17	
Boundaries	77	
Assertiveness	85	
PD Relevant/ Benefi...	1117	
> Placement	527	
Life story	61	
PD	1257	
Relationship	204	
Supervision	209	
Self Care	214	
Self awareness	466	
Reflection/Reflexivity	415	
Loss and Grief	75	
family in PD	75	

C

Appendix T- Trustworthiness in Research

Howlett and Shelton (2021, p. 109).Evidence based practice for Health professionals.
Burlington, MA : Jones & Bartlett Learning

Questions to establish Trustworthiness in a Qualitative Inquiry.

TABLE 4-12 Questions to Establish Trustworthiness of the Results Section in a Qualitative Inquiry			
Publication Section	Content	Questions	Appraisal (check one box)
Results	Sample	■ Were the participants' characteristics described in enough detail to understand how they contributed to the data? ■ Were the participants' experiences with the phenomenon varied?	☐ Strength ☐ Limitation ☐ Not evident ☐ Not applicable
Results	Data analysis	■ Which steps were taken to ensure that the interview or focus group data were transcribed verbatim? ■ How were the data coded? ■ How were categories and themes constructed? ■ How were interrelationships established and a theory constructed (i.e., grounded theory approach)? ■ Which steps were taken to ensure credibility, dependability, and objectivity during data analysis?	☐ Strength ☐ Limitation ☐ Not evident ☐ Not applicable
Results	Findings	■ Are the themes or theory presented in an understandable manner? ■ Are the findings supported by quotations from the participants to facilitate transferability? ■ Are findings presented relative to the intended purpose and each research question?	☐ Strength ☐ Limitation ☐ Not evident ☐ Not applicable

Appendix U- Three Pillars of TIC

The three pillars of TIC, as outlined by Bath (2008 b, 2015), which are: safety, connections, and managing emotions.

Pillar 1: Safety

The first pillar is safety, which can be provided when a secure base is evident; one of Bowlby's prerequisites for secure attachment to be experienced. Similar to Harlow's monkey experiments, when felt security and comfort was chosen over nourishment or Ainsworth's strange situation experiments, the securely attached child was easily comforted and promptly regulated their emotions upon the caregiver's return. Within relationship based practice and PD facilitation, there should exist consistency, reliability, predictability, physical and emotional availability, and honesty, all qualities essential for TIC. If attachment theory is not understood, it will be difficult to understand the intricacies of forming a therapeutic relationship and the various strategies required to co-create that relationship within PD and later within practice.

Crenshaw and Murdock's (2007) analogy of the Fawn and the Gorilla is a means of describing traumatised individuals' attachment seeking behaviours. An insightful description on how to approach individuals displaying either Fawn or Gorilla tendencies correspond with Dockar-Drysdale's (1968) descriptions of the completely unintegrated frozen child and the false self a child with an outer shell to protect their internally frightened self. Another poignant paper is Fraiberg's (1975) Ghosts in the Nursery, outlining intergenerational parenting and attachment styles.

Pillar 2: Connections

The second of the three pillars of TIC is connections. The very essence of connections relies on relationship-based approaches to the work, in addition to appropriate modes of communication and interpretation of communication, as mentioned earlier in this chapter. Furthermore, it is enhancing and facilitating positive connections between the individual, their carers, and others with whom the traumatised individual interacts. Often, it is when connections are non-existent or

severed that trauma is most likely to occur, as was my experience some years ago when a foster carer videoed their chronically traumatised foster child in the throes of complete and utter dysregulation or, as Dockar-Drysdale (1968) suggests, unintegration. Dockar-Drysdale, (1991) goes on to say the child cannot hold onto or think about feelings, and they have to be discarded onto other people, “usually in massive blame and projective anger, or sometimes in delinquent merger with others”(p. 131). Violent panics and disruption are the “hallmark of unintegration” (p. 131). This was an opportunity to work, in what Ward (2002) termed, an opportunity led moment, where the individual needs to be held psychodynamically, as well as physically. They need to feel a secure base and feel that security will be provided unconditionally. The foster carer did not have the benefit of SCL or PD, and they had unmet needs themselves for praise for what they endured as a foster carer. In this instance it was to demonstrate having fostered this child and all they had to endure. This need was put before the needs of a chronically traumatised child.

Pillar 3: Managing Emotions

The third pillar is managing emotions. Managing behavioural and emotional impulses are often beyond the capabilities of traumatised individuals encountered and worked with, as illustrated above. In fact, the more dysregulated the individual is, the more it provides a snapshot into the degree of trauma experienced. Furthermore, the more secure the individual feels in the SCW's company the more likely they are to respond to the arousal of feelings attributed to the experienced trauma in a way that can be frightening to the SCW and the individual (Bion, 1961; Bowlby, 1969,1980; Howe, 2011 and Stern, 2004). This brings us back full circle to the work of Dockar-Drysdale, (1968,1991,1993), Winnicott, (1960,1985) Bion, (1961,1994). This involves being aware of transference and counter transference, understanding at what stage of development the trauma occurred, and then working with the individual in an age appropriate way that provides the primary task and care that was interrupted due to the trauma. Also, most importantly, is providing what Bion (1961) termed containment, the capability of taking the individual's pain or outburst and returning it to the individual in a more manageable way by naming the feelings attributed to the outburst and soothing the individual. This mode of response will aid the individual, in time, to recognise these emotions and begin to self-regulate. This step is often missed if the receiver of the outburst is unexpectedly

triggered themselves or reacts to the behaviour punitively or by shaming the individual, with irreparable damage occurring in that very moment. This is the reason why PD is beneficial in providing learners with the opportunity to work on their self-awareness and to regulate their own emotions before working in practice.

Appendix V- Origins of Social Care Work Education

A major recommendation of the 1970 Kennedy Report was for the full-time professional training for child care workers (now SCW's). Bishop Birch encouraged the setting up in Kilkenny of Ireland's first voluntary social services agency in 1970 at the School of Social Education in Kilkenny. It offered a year's full-time course, validated by the UK Central Council for Education and Training in Social Work (CCETSW), resulting in the Council's Certificate in the Residential Care of Children and Young People.

By 1987, however, the training for child care workers and social workers in Ireland had diverged along totally different academic and professional routes. The Kilkenny programme was replaced with a Diploma in Child Care, offered at four Regional Technical Colleges (RTCs), and validated by a new National Council for Educational Awards (NCEA). That Diploma was later replaced by a Two-year Certificate and a Three-year Diploma in Applied Social Studies. By the mid-1990's, a Degree in Applied Social studies was available in Institutes of Technology (IOTs).

Survey results compiled as part of the Report of the Joint Committee on Social Care Professionals (2002) identified a wide range of qualifications held by social care professionals, including undergraduate degrees and diplomas in Childcare, Applied Social Studies, and Social Care; undergraduate and postgraduate degrees in psychology and social science; and a variety of other qualifications, including Montessori education. The Report also recommended that employers complete individual training audits with their social care staff.

Those graduating after 2005 with a Three-year Diploma in Applied Social Studies were now awarded an ordinary Degree in Applied Social Studies and an Honours Degree if they graduated after four years (except DIT, they award honours Degree after 3 years). This remains the case today, with 18 HEI's providing social care education, including one university. The application is by the CAO process for school leavers and direct application to HEI of choice if over 23 years of age. Progression to various postgraduate programmes, including Social Work, is possible with an Honours Degree in Social Care Work.

The Education and Development of Health and Social Care Professionals in the Health Services, 2009 – 2014, is an educational policy document developed by the Professional Education Unit–Health and Social Care Professionals, of the HSE National HR Directorate. This policy was announced as a consultative process with key stakeholders from the Health Service Executive, Department of Health and Children, Professional Bodies, Higher Education Authority, Federation of Voluntary Bodies and Disability Federation of Ireland. However, it is not specified if CORU, SCW Educators, or SCW's were consulted; a consultation of this nature would be invaluable to augmenting the education and practice of SCW's nationwide.

Another of the statutory functions of CORU, the SCW's Registration Board, is to approve the education and training compulsory for SCW registration. This approval of education and training programmes involves a process to assess whether a HEI's programme consistently and effectively prepares graduates for entry to the SCW register. Those deemed unqualified prior to registration may be eligible to apply for the grandparenting scheme (CORU.ie). CORU's guidelines and Standards of Proficiency (SoP) can be accessed on their website (see Appendix M). If it is to be considered adequate for SCW's to register on qualification, the curriculum for the SCW programme will have to meet 80 SOP. One of the most effective ways to assess this is to match learning outcomes (LO's) from each module to the SOP. To this end, Ireland's National Skills Strategy (2025) states: "we need to create an environment where ideas flourish not to produce drones with skills....Our graduates must have a strong emphasis on creativity and flexibility, ideas and thinking outside the box" (p. 12). This articulates, very well, my fears for the future of SCW and SCW educators if we are to map the SoP, in such minute detail to the SCW Programmes and curriculum.

Appendix W – Phases of Data Generation and pseudo names

Data Generation SCWs	Data Generation PEs
PILOT begins – Phase 1	
Female participant- Nuala	Female participant Nicky
Focus group 3 males BobEoMi	Male participant- Bobbie
Female participant- Marie Claire	Male participant-John Deere
Female participant- Nadine	Male participant- Emmett

3/9/18	On-line Diaries Pilot	9 Respondents	Response Rate
Week 1	11/9/18	4 anonymous responses	44.4%

Data Generation SCWs	Data Generation PEs

Female Participant Kitty	Male Participant David
Female Participant Siobhain T	Female Participant Diana
Female Participant Louise	Male Participant Declan
Female Participant Rich	Female Participant Maria

Female Participant Kim Kardashianardashian	Female Participant Eva
Female Participant Cathy	Female Participant Jenny
Female participant Chloe	Female Participant Emma
Female Participant Pippa	Male Participant Alan
Male Participant Cara	Male participant Conan
Female participant Ann	Female Participant Paula
Female participant Mary	Female Participant Aoife
Male participant John Ryan	Female Participant Grace
Male participant Duke	Male Participant Evan
Male participant Diarmad	Female Participant Aisling
Male participant Eddy	Female Participant Vinny
Female participant Guinevere	Female Participant Siave
Female participant Molly	Female Participant Milis
Female participant Rose	Female Participant Tracey
Female participant Anna	Male Participant Colm
Female participant Majella	Female Participant Martina

Male participant Sean Og	
21 (6 male, 1 non-Irish male and 7 female)	20 (6 male and 14 female)

10/9/18	On-line Diaries Begin	12 Respondents	Response Rate
Week 1	11/9/18	10 responses	83.3%
Week 2	18/9/18	9 responses	75%
Week 3	25/9/18	9 responses	75%
Week 4	2/10/18	8 responses	66.6%
Week 5	9/10/18	10 responses	83.3%
Week 6	16/10/18	6 responses	50%
Week 7	23/10/18	9 responses	75%
Week 8	30/10/18	7 responses	58.3%
Week 9	6/11/18	8 responses	66.6%
Week 10	13/11/18	8 responses	66.6%
	Overall responses	84 /120 responses	70%

Appendix X- Mind Map- Instances of PD

