On PAR with Culture Change:

Guiding Principles and Practical Strategies for a Collaborative Journey (Part 1)

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Welcome!

Session Description: This comprehensive session, offered in two 90-minute sessions (Parts 1 and 2), details one organization's collaborative culture change journey from its philosophical, theoretical and practical origins, through its development and progress spanning 5 years, to its current status, and into the future. Participants are welcome to attend either or both sessions. This session, Part 1, aims to strengthen the work of culture change by grounding it on a solid philosophical, theoretical and practical foundation. In this interactive session, participants will examine and reflect on the culture change movement and their own experiences through the lens of 'participation', building a strong case for collaboration. Then participants will explore the use of participatory action research (PAR) as an inclusive, engaging and effective change strategy that is perfectly aligned with culture change values. PAR aims to establish self-reflective groups of people committed to changing themselves and, in doing so, transforming the world around them. Participants will also learn about successful applications of PAR within the culture change movement and consider practical strategies to begin or strengthen their journey.

In this session, we will…

1.	**Compare** critiques of modern society with critiques of long-term care and **identify** structures and patterns which lead to conditions known as 'cultural impoverishment' and 'social pathologies'
2.	**Critique** various culture change approaches through the lens of 'participation' as defined by critical social theory, building a case for the use of participatory action research to guide culture change processes
3.	**Learn** about practical applications of participatory action research within the culture change movement in the U.S. and Canada
4.	**Critique** a practice example of a culture change process guided by participatory action research within a long-term care and retirement living organization
5.	**Share** insights gained to collaboratively **identify** at least three practical 'take-aways' for immediate application

Learning Opportunity 1: Modern Society, Long-Term Care and Cultural Impoverishment

Please **listen** to a mini-lecture about how critical social theorist, Jurgen Habermas, views modern society and use the space below to **draw** and **label** the following (hint: **cross off** words as you **add** them to your drawing):

- Communication and shared understanding
- Cultural impoverishment
- Culture, rituals and traditions
- Economy and state
- Efficient means to an end
- Formal systems of 'expert' thought
- Home
- Instrumental rationality
- Leisure
- Lifeworld
- Long-term care home (or SNF)
- McDonald's
- Military
- Modern society
- Money and power
- Recreation therapy
- Science
- Social interactions and integration
- Social life and personality
- Social pathologies
- System
- Systems-thinking

Learning Opportunity 2: Revitalizing the Culture of Long-Term Care

As a group, let's **read** and **discuss** the following passage which suggests how we can revitalize the culture of long-term care by ensuring people have a voice and choice in meaningful decisions. We will need 4 volunteer readers.

1. Culture change pioneer, Barry Barkan (2014), asks: "How can we midwife the cultural paradigm shift from a selfish, mechanistic, hierarchical culture to one in which all of humanity functions as one interconnected, generous, living organism and each person can achieve one's highest potential?" In essence, Barkan is asking how we can revitalize the lifeworld of long-term care.

2. Some proponents of culture change say that long-term care is a 'broken system', but perhaps the chief problem is that long-term care is *treated as a system* and that systems-thinking and instrumental rationalities have invaded the living, breathing lifeworld of long-term care like a parasite. We have applied systems-thinking to places of everyday living where people are often treated as either inanimate objects or robots that must follow predetermined schedules, routines and practices. Human reason, gained through communication and shared understanding and decision-making, has been replaced by bureaucratic, disciplinary and scientific reason that tends to control and exclude the experiences and knowledge held by those who live and work within long-term care homes.

3. We do not need a 'better system'. The task of healing, renewing and revitalizing the lifeworld of long-term care calls for a turn *away* from the system and toward human discourse and action. Barkan (2014) explains: "The solution is a real community in which people know each other and have role and identity; where their daily life in the present is connected to who they have been and who they are becoming; and where individually and collectively people have a voice and a choice in the small and large decisions that impact their lives."

4. Here, Barkan points us away from systems-thinking and toward human engagement where meaningful decisions are made not by or because of a system, but by people, individually and collectively, within a real community.

Large Group Discussion Question: What are some examples of how human reason, gained through communication and shared understanding and decision-making, has been replaced to some extent (and perhaps inappropriately) by bureaucratic, disciplinary and/or scientific reason in long-term care?

Now, as a group, let's **read** and **discuss** the following passage which speaks to the importance of engaging residents, family members, direct service workers, and other care partners as 'authentic participants' in the work of culture change, and not simply as the beneficiaries of change. We will need 5 volunteer readers.

1. Culture change requires us to look beyond the boundaries of systems created by experts, and to seek, instead, alternative sources of knowledge, those which are often excluded or subordinated. We must honor the lived experiences and knowledge of all those involved within the context of long-term care, especially those who live and work there.
2. All people and "all groups have a right to speak for themselves, in their own voice, and to have that voice accepted as authentic and legitimate" (Harvey, 1999, p. 310). Through dialogue and collaboration with others, we can develop a greater understanding of the current culture, and with a range of meanings, instead of a single, authoritative interpretation, address the question, 'Where do we go from here?'
3. Ironically, some culture change efforts rely upon internal and/or external experts in their design and implementation, perpetuating the very hierarchies which they seek to flatten. In fact, until recently, little evidence suggests that direct care workers, family members or residents themselves have participated in the design and implementation of culture change strategies in long-term care.
4. "Generally, changes are made 'on behalf' of residents to promote their best interests and improve their quality of life while leaving residents themselves out of the change process… [This] is not an unrecognized problem by pioneers in long-term care reform, yet it presents formidable challenges" (Shura, Siders, & Dannefer, 2011, p. 213). To truly change the culture, we must find solutions to these challenges. We must find ways to engage residents, family members, direct care workers, and other care partners as authentic participants – as true partners – in the work of culture change.
5. Tandon (1988) identified three determinants of 'authentic participation': 1) people's role in setting the agenda; 2) people's participation in data collection and analysis; and 3) people's control over the use of outcomes and the whole process (p. 13). Authentic participants do not just 'buy into' the culture change process, they 'own' it. Herbert (1996) offers another view of participation in terms of levels (the 7 Cs) ranging from collusion, co-opting, coercion, convincing, coordination, and cooperation, to true collaboration.

Small Group Discussion Question: In small groups, please **ask** one (brave*) person to **describe** a 'culture change experience' in which they have participated (at some level). **Find out** who was involved in the planning, design, implementation, evaluation, etc., of the culture change work, and **reflect** on the participation levels of the following stakeholders at every stage:

Residents
Family members
Direct care workers
Management
Senior leaders/owners
Other partners or community stakeholders

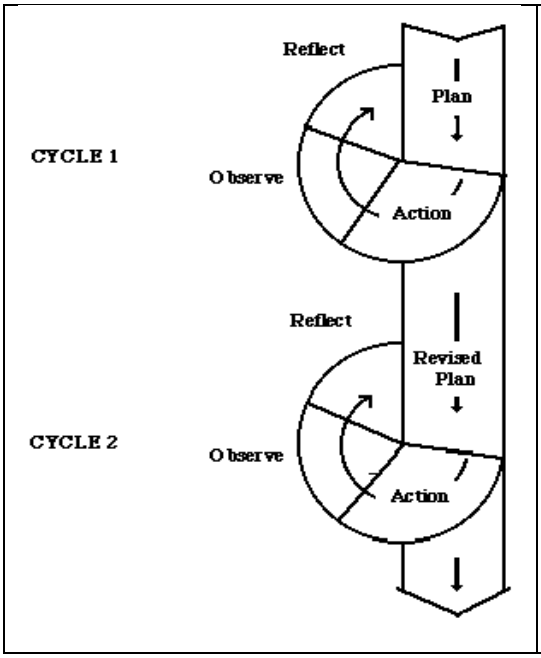
**Please note: I am asking the 'brave person' who volunteers to share to engage in critical self-reflection.*

Learning Opportunity 3: Participatory Action Research and Culture Change

Now, as a group, let's **read** the following passage which briefly describes participatory action research and its transformative potential for the culture change movement. We will need 4 volunteer readers.

1. Participatory action research (PAR) offers a unified research methodology and change strategy that is perfectly aligned with the principles and values of the culture change movement as all those involved within a given context can join together as co-participants in the challenge of transforming the culture of long-term care.
2. In contrast to expert-driven approaches to change, PAR enables organizations to draw upon and maximize existing resources, viewing those with lived experience as the real experts. Instead of promoting a particular vision of a transformed culture, PAR engages unique communities of diverse people – residents, family members, team members at every level, etc. – in the creation of a more ideal future, enabling a multitude of visions to be expressed and a common way forward to be negotiated and achieved.
3. PAR brings groups of people together to address questions and issues that are most significant to those gathered. It engages groups of people in a practical and cyclical process of speaking and reasoning, collaboratively planning and taking action, and then observing and reflecting as they strive for social change (see Figure 1).
4. Reason and Bradbury (2008) offer the following definition: "Action research is a participatory process concerned with developing practical knowing in the pursuit of worthwhile human purposes. It seeks to bring together action and reflection, theory and practice, in participation with others, in the pursuit of practical solutions to issues of pressing concern to people, and more generally, the flourishing of individual persons and their communities (p. 4)."

Figure 1. The action research spiral (adapted from Kemmis & McTaggart, 1988)



Imagine if members of your community ***collaboratively…***

1. ***Planned*** action to improve what is currently is.
2. ***Acted*** to implement the plan.
3. ***Observed*** the effects of the action.
4. ***Reflected*** on these effects as a basis for further planning, subsequent action and so on, through a succession of cycles.

A Few Examples of PAR in the Culture Change Movement

- **Carson, J.** (in progress). *Working Together to Put Living First: A Culture Change Process in a Long-Term Care and Retirement Living Organization Guided by Critical Participatory Action Research*. University of Waterloo.
    - Schlegel Villages website: http://www.schlegelvillages.com/ (click on 'news')
    - Carson, J. & d'Avernas, J. (2012). Working together to put living first: Appreciate culture change in long-term care. *Appreciative Inquiry Practitioner, Special Issue*.

- **Dupuis, S.L., Whyte, C., Carson, J., Genoe, R., Meschino. L.M., & Sadler, L. (2012)**. Just dance with we: An authentic partnership approach in understanding leisure in the dementia context. *World Leisure Journal on Leisure, Health, and Disability*, 54(3), 240-254.

- **Partnerships in Dementia Care (PiDC) Alliance**: Co-led by Dr. Sherry Dupuis, Professor, University of Waterloo, and Dr. Carrie McAiney, Assistant Professor, McMaster University, and brings together researchers from five universities and 50 partners representing all key stakeholder groups in dementia care.
    - PiDC website: https://uwaterloo.ca/partnerships-in-dementia-care/

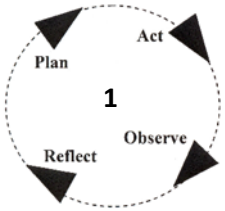
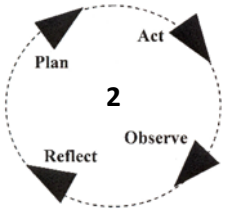
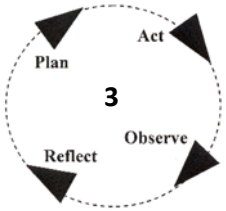
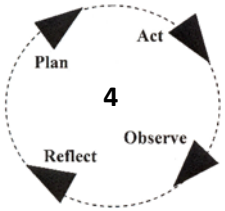
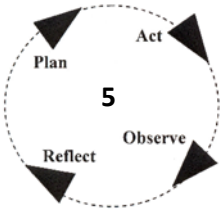
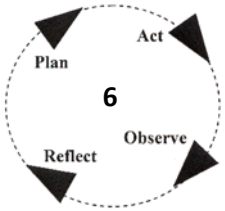
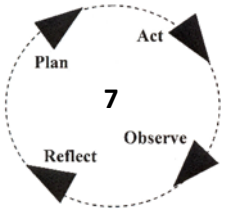
- **Shura, R., Siders, R.A., & Dannefer, D. (2011).** Culture change in long-term care: Participatory action research and the role of the resident. *The Gerontologist*, *51*, 212-221.

Learning Opportunity 4: A Practice Example of a Culture Change Process Guided by PAR

Schlegel Villages is a long-term care and retirement living organization with 12 communities ('Villages') in southern Ontario which serve a total of 3,000 residents and 3,000 team members. Each Village offers long-term care (skilled nursing) with full-service retirement living, assisted living, and memory care options added in stages (currently 6 LTCs and 5 CCRCs). In 2009, for my doctoral research, I began working with Schlegel Villages to embark on a culture change journey guided by PAR in partnership with the Schlegel-University of Waterloo Research Institute for Aging (RIA) (http://www.the-ria.ca/). The primary purpose of our research, which is ongoing, is *to facilitate, document and critique a culture change process guided by critical participatory action research, actively engaging key stakeholders – my research partners – every step of the way.* This project seeks to change the culture of aging within our Villages and to create an even wider impact by sharing our reflections and learnings with the broader community.

In Part 2 of this session, you will be invited to **listen** to a detailed practice example of Schlegel Villages' culture change journey, summarized on Table 1 on the following page. For the purposes of this session, let's briefly **review** Table 1 and then, as a group, **critique** Schlegel Villages' use of PAR principles and practices using the checklist on the last page. Which principles and practices of PAR seem evident in this example? Let's first **review** the checklist together, then Table 1, and then we will **critique** this example and have dedicated time for further discussion.

Table 1. Seven cycles of critical participatory action research at Schlegel Villages (Carson, 2014)

						
2009 **My Reconnaissance**	**2009** **Schlegel Villages' Reconnaissance**	**2010** **Appreciative Inquiry Summit**	**2011** **Working Toward Our Aspirations**	**2012** **Building a Collaborative Culture**	**2013** **From Huddles to Neighbourhood Teams**	**2014** **Reflecting on Our Culture Change Journey** (In Progress)
Significant Actions and Events in this Study						
Reviewed long-term care (LTC) and culture change literature Reflected on my experiences as a LTC and retirement living professional since 1987 Identified lessons-learned and the values and assumptions I bring into the research context Shared my self-understandings with my potential research partners at Schlegel Villages	Engaged 140 leadership and frontline team members in dialogical education, consciousness-raising, and collaborative learning about culture change at annual operational planning retreat With strong consensus, we made the decision to embark on a culture change journey Selected Appreciative Inquiry (AI) to help guide the culture change process	Formed the Support Advisory Team (SAT) to guide the culture change process SAT planned the AI Summit Held AI discovery focus groups at each Village SAT facilitated a 3-day AI Summit with 180 Village members and developed aspiration statements Conducted an evaluation of the AI Summit	Developed operational planning goals based on selected aspirations Shared success stories at annual leadership retreat Broadened engagement through culture change events (e.g., Roadshow, Conversation Cafés, and Pioneer Network Conference) Focused on authentic partnerships and collaboration at annual operational planning retreat	Developed operational planning goals based in selected aspiration statements Formed a Village Advisory Team (VAT) at each Village Broadened engagement through culture change events Focused on quality of life (QOL) and interdisciplinary collaboration at annual operational planning retreat	Developed neighbourhood-specific operational planning goals based on top-5 and bottom-5 quality indicators (QIs) Held daily, neighbourhood, quality shift huddles Neighbourhood teams did root-cause analyses on top-5 and bottom-5 QIs Broadened engagement through culture change events SAT planned a reflection on our culture change journey	Continuing all actions from Cycle 6 and added quarterly neighbourhood team development days Reflecting on our culture change journey through Conversation Cafés, QOL surveys, interviews, and research reflection retreat Sharing our story with other organizations through presentations, publications and the development and dissemination of a guidebook

Participatory Action Research (Checklist)

If yours is a situation in which:

- ☐ people reflect and improve (or develop) their own work and their own situations;
- ☐ by tightly interlinking their reflection and action; and
- ☐ also making their experience public not only to other participants but also to other persons interested in and concerned about the work and the situation…

and if yours is a situation in which there is increasingly:

- ☐ data-gathering by participants themselves (or with the help of others) in relation to their own questions;
- ☐ participation (in problem-posing and in answering questions) in decision-making;
- ☐ power-sharing and the relative suspension of hierarchical ways of working, in a conscious move towards social and industrial democracy;
- ☐ collaboration among members of the group as a 'critical community';
- ☐ self-reflection, self-evaluation and self-management by autonomous and responsible persons and groups;
- ☐ progressive (and public) learning by doing and making mistakes in a 'self-reflective spiral' of planning, acting, observing, reflective planning, etc.; and
- ☐ reflection that supports the idea of the 'self-reflective practitioner';

then yours is a situation in which action research is occurring. (Zuber-Skerritt & Fletcher, 2007, pp. 415-416)

Learning Opportunity 5: Applying Critical Insights

In small groups, please **share** insights gained to collaboratively **identify** at least three practical 'take-aways' that can be applied across your practice or living environments (i.e., three practical take-aways that you all agree can be achieved within your respective practice or living environments). We will **hear** a sample of responses.

Practical Take-Aways
1.
2.
3.