

**Wellbeing on the Healthcare Frontline: A safe laboratory for critical action learning**

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Biography: Elizabeth Cotton is a Senior Lecturer at Cardiff Metropolitan University. She has worked as a trade union educator for Global Union Federations and as an honorary psychotherapist in the UK's National Health Service (NHS).

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## **Abstract**

This article explores the potential for using an emancipatory education model, based on the work of the Brazilian pedagogue Paulo Freire, to promote the wellbeing of frontline healthcare workers. It is argued that a three-stage PIP model (problem, information, planning), an emancipatory method used widely within trade union education programmes, can be understood as a methodology based on the principles of critical action learning (CAL) in that it adopts a critical perspective and examines power relations, explores emotional experience and is action oriented. Further, that because this model of learning is based on collective reflection it is a methodology which prioritises building relationality. This autoethnographic study offers three vignettes of wellbeing interventions carried out with healthcare workers using a PIP model. It proposes that addressing wellbeing in the current healthcare context, highlighted during the Coronavirus crisis, requires a critical and relational approach that supports healthcare workers to collectively address problems at work. As such, it is argued that the PIP model provides an alternative approach to wellbeing from the dominant and individualistic positive psychology model. This article contributes towards the utilisation of a CAL framework within the workplace and offers practical insights for management learning within the wellbeing field.

## **KEY WORDS**

Wellbeing, healthcare, frontline workers, emancipatory education, critical pedagogy, critical action learning, trade union education, positive psychology, UK National Health Service (NHS).

## **INTRODUCTION**

In addition to the occupational hazards of working with people in distress (Evans, 2015), the Coronavirus outbreak has highlighted the systemic pressures placed on healthcare workers and the consequences for their wellbeing (Wang et al., 2020). Research indicates low levels of wellbeing within particular healthcare professions (Wilkinson, 2015), with an emerging literature that links mental health problems to insecure forms of employment such as zero hours contracts and self-employment (Marmot, 2020) and the impact of performance management on conditions of work (Boxall & Macky, 2014). In this context, the ‘thin’ model of wellbeing that currently dominates workplace wellbeing programmes (Purser, 2019), based on a model of positive psychology which focuses on individual cognitions and behaviours, can be experienced as “practically inadequate and professionally dissatisfying” (Reynolds and Vince, 2004: 443) as it leaves the structural and material causes of low wellbeing intact.

This article proposes a shift in perspective from an individualist and decontextualised model of wellbeing towards a relational and critical model that responds to workplace wellbeing factors within the healthcare sector. We explore this alternative approach through an autoethnographic study of PIP, based on a model of emancipatory education and developed from the work of the Brazilian pedagogue Paulo Freire. PIP is a three stage process of problem identification, information gathering and collective planning, and each of these stages is presented through a vignette in the findings section. In the next section, it is argued that PIP can be understood as a methodology based on the principles of critical action learning (CAL) in that it adopts a critic-

al perspective, examines power relations, explores emotional material, relies on collective reflection and is action oriented. It is then argued that through PIP's collective enterprise of consciousness raising and day-to-day problem solving material changes can be made in participants' working lives as well as forming the basis for relationality.

Further, it is proposed that the symbolically positive wellbeing agenda offers a potentially protected space for this challenging learning process to take place. The 'problem' of carrying out critical learning within workplaces is well understood (Learmonth, 2007: 111) where it may be seen as 'too high a risk to reflect publicly on organisational dynamics' (Vince, 2004: 77). As a result, adopting a CAL approach may require the utilisation of spaces that are not typically recognised as opportunities for critical thinking (Reynolds & Vince, 2004). The proposal is that the wellbeing agenda could provide a 'relatively safe laboratory for learning' (Marsick & O'Neil, 1999: 170) because it offers the protection of an authorised gathering where emotional experiences of work can legitimately and collectively be explored. In so doing, this article contributes to the management learning literature by arguing that PIP methods can be understood as an application of CAL principles and by offering practical insights for management learning into the promotion of workplace wellbeing.

This article is structured in the following way. It begins with an outline of the PIP model positioned within the CAL tradition. Next it describes the methods used to collect and analyse the material of the study followed by the findings, using three vignettes incorporating work carried out with healthcare workers in the UK's National Health Service (NHS). It concludes with a discussion about the outcomes of using a PIP process, and implications for management learning in the wellbeing field.

## **THEORETICAL BACKGROUND: THE PIP MODEL AS CRITICAL ACTION LEARNING**

The PIP model has evolved out of European worker education traditions and the work of the Brazilian pedagogue, Paulo Freire (1970) and is used widely by trade unions as a key organising tool. Despite this, the PIP model, as it is used by national and international trade unions, is under theorised and not well represented in the industrial relations and pedagogic academic literature (Croucher & Cotton, 2011). PIP is a three stage process of problem identification, information and resource gathering, and collective planning using dialogic methods. Consistent with critical action learning (CAL), PIP is a problem oriented process where reflection is a relational activity (Cotton, 2017b, Vince, 2008) aimed at critically and collectively understanding workplace systems (Raelin, 2006) and identifying areas for collective action (Spencer, A). The proposal of this article is that PIP offers a series of learning techniques founded on a set of principles that are shared with CAL. Namely, that both PIP and CAL adopt a critical and constructionist perspective (Reynolds, 1999b), examine power relations (Cotton, 2017b, Trehan & Rigg, 2015), explore emotions and emotional experience (Vince, 2002) and are action oriented (Spencer, 2002; Vince, 2008). Further, they are both models that assume that learning is founded on collective reflection and, as a result, emphasise methods that build relationality (Cox & Hassard, 2018). Reflecting the belief that our perceptions, knowledge and sense making of reality are socially constructed (Dehler, 2009), PIP takes as its starting point that the principal aim of learning is to establish ourselves as subjects with the capacity to define our own ex-

periences, consistent with CAL (Revans, 1982). As with CAL, PIP is a process where it is through collective questioning, reflection and ‘experimentation’ that learning and development can take place (Spencer, 2002; Trehan & Rigg, 2015).

PIP is a relational epistemology in that it is premised on the belief that it is through collective reflection on participants’ experiences and the subsequent ‘relational knowledge’ (Park, 1999) that is created out of it, that learning takes place (Reynolds & Vince, 2004). Within this model, the first stage of learning involves problem identification through a collective and critical exploration of organisational problems and power dynamics aiming to “promote a deepening of critical thinking on the daily realities of participants” (Trehan & Rigg, 2015). This process involves consciousness raising, ‘conscientizacao’ (Freire, 1970), where we learn about reality through reflecting on our own experiences and those of the people around us such that the power structures within which experiences of work take place are reflected on critically (Reynolds, 1999b).

This process of collective reflection on real life organisational issues (Reynolds & Vince, 2004) involves critical thinking about the context of power and social relations within which they occur (Hibbert, 2012). The second stage of PIP activities are designed to deepen participants’ understanding of their environment, using small group discussions, literature, case studies and real life problems as well as emotions and the emotional experiences of participants (Vince, 2001). In order to encourage engagement with participants’ emotional experiences of work, PIP utilises experiential learning methods such as role play and simulation, that make use of emotional and unconscious material in the learning process (Raelin, 2006). Additionally, this can

involve working with unconscious material, such as using workplace observations and supervision groups as explored in vignette 2, where organisational dynamics and power relations are made 'conscious' (Trehan & Rigg, 2015:794) and understood through our experiences of them. In addition to consciousness raising about the systems within which we work, Freire's thesis is that full emancipation involves addressing both the external 'oppressors' and the internal 'oppressor', aspects of individual psychic experience which oppress or inhibit us. As a result activities are designed to encourage exploration of emotions and emotional experience, including deep rooted and unconscious beliefs. Freire's thesis is not that internal change is a substitute for attempts to change external reality, rather that emancipation is a dual process of challenging external and internal 'oppressors' in order to build agency where the participants are capable of making critical judgements about reality and of taking action.

Within PIP collective action as an outcome of emancipatory education processes is key, reflecting the belief that emancipation requires more than consciousness raising about power dynamics and necessarily involves taking action in response to them (Raelin, 2008). As a result, the third and final stage of any PIP activity focusses on collective problem solving and planning responding to the problems identified in the first and second stages of the PIP process. This third stage can be structured using different activities, such as the mapping exercise outlined in vignette 3, but with a central aim to agree a collective plan of action to bring about material changes in the workplace.

Using a PIP model requires constant attention to the 'unresolved dissonance' (Vince, 2002:163) of group dynamics and anxieties, inherent in the critical learning process (Reynolds, 1999a). In order to manage these anxieties, defences

can be enlisted by participants such as ‘gang like’ (Canham, 2002) defences of bullying and racism, common in healthcare systems (Francis, 2013) where feelings of threat or anxiety are projected outwards. The PIP tutor’s capacity to maintain thinking and dialogue within the group is particularly important with wellbeing interventions given the emotional nature of the learning process. This is achieved in part by using a consistent framework that maintains confidentiality, regularity of hours, continuity of spaces and behaviours that promote dialogue and the formation of relationships based on trust. Additionally, although the capacities of tutors to work with group dynamics will vary, to facilitate PIP sessions there has to be an ability to think about the dynamics within the learning setting as they are happening (Dashtipour & Vidaillet, 2019) in order to provide a protective environment or “container” (Bion, 1970). This containment is required to allow participants the scope to critically question and learn from their experiences within a group setting while building the possibility of acting collectively.

It is this adoption of a critical and constructionist perspective, exploring power relations and raising consciousness through collective reflection, working with emotions and emotional material and taking action that places PIP within a critical action learning framework.

## **METHODS: AUTOETHNOGRAPHY AND SELF-REFLEXIVITY**

The material used in this article represents an autoethnographic study (Learmonth & Humphries, 2011; Pederzini & Barraza, 2019) of three PIP courses carried out with healthcare workers in a hospital, trade union and university setting, delivered by the author during 2014-2016. As an autoethnographic study the author is positioned pri-

marily as a participant in the vignettes presented in the next section, and therefore ‘part’ of them, where reflections are based on a “performative ethnographic process that relies on the researcher’s capacity to affect and be affected in order to produce interpretations that may transform the things that they interpret” (Gherardi, 2019: 742) rather than from a removed position of participant observer.

Although the analysis carried out through supervisions and the writing process is self-reflexive, the findings of this body of work are self-referential and therefore partial (Cunliffe, 2003). In order to explore the intersubjective, unconscious and emotional experiences of participants, three vignettes are used, one for each stage of the PIP process giving ‘a sense of being there for the reader’ (Jarzabkowski & Bednarek, 2014:3). Vignettes provide a temporal coherence to the body of work on which they are based and link theoretical concepts to interpret and explain this material. The article is structured such that the core concepts have been introduced before the vignettes to strengthen the narrative as a way of ‘theoretical telling and empirical showing’ (Berends & Deken, 2019:7).

Vignette 1 relates to a course delivered in 2016 to an interdisciplinary team (25 participants) working in a secondary Mental Health unit in a hospital setting. The two part wellbeing course had been requested by the Clinical Manager of the team to assist with a reported issue of bullying and communication breakdown within the team. Vignette 2 relates to a cohort of eight students in 2014 studying a resilience module developed by the author as part of a postgraduate Human Resource Management (HRM) MA programme delivered within a business school setting for public sector managers and graduate trainees. The module followed a format of small group dialogic activities mixed with short lectures using the PIP model. Vignette 3 relates to

the final activity of a three part course carried out with a group of trade unionists attending a post graduate leadership programme designed specifically for trade unions at a Further Education college in 2015. There were twelve participants with representatives from the two largest trade unions organising in the health sector.

The research material has been 'reworked' into a narrative to increase coherence and explanatory use (Jarzabkowski & Bednarek, 2014), and is made up of tutor notes made immediately after each session, participants' evaluations and notes from the author's own work supervisions. Throughout the delivery of these courses the author maintained the discipline of writing observations and associations immediately after each session in order to capture the material and experience of facilitation. For all three courses, participant evaluations were based on self-defined actions they committed to taking which were reviewed with them one and three months after the course completion by email and phone. Additionally, recorded interviews were carried out with eight of the trade union participants focussed on the impact of their participation in the course.

The pedagogical experience of delivering emancipatory education comes from the author's work with global union federations during the period 1995-2007 in developing and transition economies, an analysis of which had been carried out through published case studies (Cotton & Royle, 2014; Croucher & Cotton, 2011). During the development of the courses outlined in this article, the author was training and working part time as an adult psychoanalytic psychotherapist in the NHS which served to inform the interpretive nature of the inquiry. A psychoanalytic framework offers a way to make sense of the complexities of group dynamics and unconscious aspects of organisational life by exploring our experiences and associations of them (Armstrong,

2012). It pays attention to psychic phenomena such as projection and splitting, exhibited in organisational settings, understanding them to be strategies enlisted as defences against anxiety (Steiner, 1993). Within this psychodynamic model, anxiety is recognised as an intrinsic part of the experience of being in groups and of working life and provides an interpretive framework for critical thinking about workplace dynamics (Kraemer, 2015). The psychoanalytic practices of free association and understanding experiences of work through the analysis of ‘fragments’ (Cunliffe, 2003) have been emphasised in the facilitation of these courses and the vignettes presented here to explore the emotional and unconscious experiences of the participants and the author.

In order to look reflexively at my own work I participated in monthly psychodynamic workplace supervisions during the period 2014-2016 where I could take a position of ‘betweenness’ (Cunliffe, 2003: 990) and engage in both critical reflection on the material being observed and self-reflexivity (Hibbert et al., 2019), exploring and making sense of my experiences. These supervisions followed a psychoanalytic model of free association and analysis of details in the material in order to explore the unconscious and group dynamics, including my own participation in the groups. The containment of this supervisory space allowed me to engage in the critical sense-making that forms the basis of the ideas presented here and, as such, is self-reflexive (Cunliffe, 2018). In order to present the situated nature of the material I have included my own experience and associations as the tutor in the first person, taken from notes written after each session and from supervisions. Incorporating this first person voice, presented in italicised form in the three vignettes, attempts to highlight my involvement in the formation of the narratives and findings of this study. Additionally,

the political and philosophical motivations for working in emancipatory education have influenced my experience and the reflexive process of writing and re-writing this article. This includes my privileging of a Freirean ontology and motivation to find methods that can build solidaristic relationships, and in this sense also this analysis is autoethnographic.

## **FINDINGS: AN ALTERNATIVE THREE STAGE WELLBEING MODEL FOR HEALTHCARE WORKERS**

The PIP model is a three stage process of problem identification, information gathering and planning. Examples of each stage are given using vignettes taken from three different contexts working with participants from the healthcare sector. The author's reflections and associations are presented in italics in each of the vignettes.

### **Stage 1: PIP Problem identification**

Each PIP activity starts with an exercise that asks participants to define in their own terms what issues they are facing at work. PIP is a problem oriented process where collectively defined problems around which the curriculum is subsequently based to understand and actions developed that can address them. This is often done working in pairs or small groups which can be helpful in stimulating dialogue because of the lower levels of anxiety people often feel working in smaller groups.

This activity can be carried out using a 'listening swap' in pairs where participants are asked to spend five minutes listening to their partner on a wellbeing topic, without interruption or asking questions. The tutor will then ask the pairs to swap roles for a further five minutes, after which they will ask participants about the expe-

rience and what issues came up. This activity is then extended to small group discussions to explore the themes that have emerged.

***Vignette 1: Bullying as a defence against external threat***

This course took place in the large staff room of a Child and Adolescent Mental Health Service (CAMHS) unit, in the context of a large regional hospital that had recently undergone a large scale merger and renovation. Despite the lack of attendance at staff meetings during the last year, there were not enough seats for everyone so half the participants sat on the floor in the middle of the room. In the first session during which this activity took place the majority of staff attended, with the exception of a senior clinician who had been accused of bullying by three clinical psychologists in the team. As is typical, participants chose to sit within their professional clusters with three young women sitting in a small group cross legged on the floor right at the front of the room directly at my feet.

*Looking at these faces staring up at me I wonder who is the CAMHS baby here? Are you looking to me to protect you from someone?*

I noted this association, as the positioning of people and their shaping of the environment can convey important and unconscious communications. I introduced the listening swap asking the question “What are the real wellbeing problems here that you think need to be addressed?”. Because of the odd number of people in the room Participant A, did not have a partner so I invited her to carry out the exercise with me. She started to speak immediately about the ‘bully’ in the team, breaking the request for

anonymity she repeatedly used the name of the person and related in detail her experience of being bullied. I realised that the three women sitting at my feet were the clinical psychologists who were involved in the bullying accusation. She started to cry, and speak loudly so that other participants began watching her rather than carrying out the listening exercise. I felt that the emotion shown here was not authentic in that it had the immediate impact of drawing other participants into the 'drama' of the alleged bullying. This could be understood to be a defensive attempt to block discussion about other issues affecting the team as well as undermining my facilitation of the group as a critical co-investigator (Freire, 1970) by pushing me into a parental role.

After five minutes I asked the participants to swap roles and Participant A looked furious that I had interrupted her. I started to talk about my own workplace and increasingly felt uncomfortable as she stared at me as both of us were becoming red in the face. Participant A interrupts me and says "I'm going to stop you there because you're missing the point. I've got to tell you that nobody wanted to come to this workshop, everyone thought your course looked stupid and we're only here because we were told to be here by our manager." I felt this exchange touched on the tension that exists in carrying out consultancy work to an organisation, where participants can be 'customers of a product' (Rigg & Trehan, 2008: 380) as well as participants of a workshop.

*My throat feels dry and painful. I am thinking about what it would be like to be a child in her consulting room. I want to say something spiteful about this. To go for the 'professional jugular'.*

My response highlights the unconscious dynamics at play during this interaction where my associations involve a desire to attack Participant A. I asked her if she felt it was going to be possible to talk about the bullying in this group, she answered, “I’ve already solved it, because she’s not here. Problem solved. This is supposed to be a wellbeing course, now all you have to do is to make me feel better”.

*I wanted to congratulate her on boxing me into this binary of bully/victim and putting me in my place about what I was there to do. Who’s the bully here?*

This interaction highlights the strength of defence mechanisms that are encountered in PIP settings, such as attempts to block discussion, silencing and falling into black and white thinking. In this exchange about bullying there is an attempt to undermine me as a facilitator where Participant A has already ‘solved’ the problem of bullying and my experience of being ‘boxed in’ to the role of making the participants ‘feel better’. This projection of feelings of manipulation and helplessness into me is part of the dynamics of bullying where the perpetrator’s vulnerability is projected into the victim in an attempt to rid themselves of uncomfortable emotions (White, 2013).

It is through PIP’s emphasis on collective identification of workplace issues, and acceptance of a pluralist perspective, that it attempts to loosen these defences so that workplace dynamics can be explored. Following the listening swap activity, I asked the group to talk in small groups of 4-6 about what problems had emerged. The purpose of working in small dialogic groups is to allow participants to speak about their experiences, particularly important for groups like this where people have withdrawn and stopped communicating. To encourage critical questioning within the

groups, PIP tutors sit with each group for a short time, asking questions about underlying systemic factors such as “Who is really responsible for this?” and “Who is benefiting from this situation?”. This process includes challenging attempts to reduce and individualise problems that are underpinned by broader environmental and societal factors.

At the end of this activity the groups report back on the issues that have been raised and the tutor writes them down on a flip chart, asking questions about clarity and language so that the issues are formulated in their own words or language that they feel fairly represents their point of view. This process of questioning offers a reality-testing function where diverse experiences can be expressed and challenged providing an opportunity for consciousness raising (Freire, 1970). Facilitating multiple perspectives on workplace problems acknowledges the constructed nature of workplace realities and can promote understanding of the context within which participants are working (Reynolds, 1999a).

During this group discussion Participant A sat on the floor behind the flip chart to my left, staring provocatively at her colleagues as I write up their ideas.

*Why don't you want to see what other people think is going on here? What are you frightened of people talking about?*

Using this association and my experience of a sore dry throat I felt that there was a dynamic of silencing within the group and decide to rephrase the question asking “Tell me about the problems that always get missed off the agenda?”, as a way of encouraging the participants not to revert to scripts about bullying and ‘communication

breakdown' between individual members of staff and articulate whatever issues were being blocked from view. During the discussion participants raised systemic issues of performance management and recovery targets, workplace cultures with no mention of the issue of bullying. Towards the end of the discussion one of the groups mentions, as if in passing, that the CAMHS unit is supposed to be relocating but that the new facility is not ready for them raising the prospect of the service being 'homeless'.

*I feel angry at the group for casually raising this vital piece of information at the end of the activity. They were supposed to be keeping their eye on the baby.*

This disappointment in the 'parenting' of this group of CAMHS workers is connected to the realisation that the participants are subject to the same dynamics that dominate their organisation (Reynolds & Vince, 2004), one of neglect and the individualisation of workplace problems to avoid critical scrutiny of deeper systemic problems. I focus my questions on this problem of 'homelessness' asking for clarifications and participants' perspectives on how to respond to this specific issue. Despite the defensive practices exhibited within the team during these discussions, the group was able to work quickly to define and understand this new element and formulate the problems they faced in a way that allowed them to determine some future actions by the end of the session. By articulating a key problem of homelessness, there was a movement from individualistic to collective thinking shifting the group's attention from the 'drama' of bullying towards the issue of how they, as a service, were going to function without a physical base.

This shift away from the original problematic of bullying identified by the team prior to the workshop towards a different problem is common in PIP sessions because the problematic is collectively defined and not restricted to the issues that have, for whatever reason, been articulated within the organisation so far (Raelin, 2006).

### **Stage 2: PIP Information gathering**

The second stage of PIP involves activities aimed to understand the problems identified in Stage 1 more fully and identify resources and strategies that may form part of any future action. Although now rarely used in trade union education, Freire advocated a method of carrying out workplace observation visits to understand the underlying power dynamics that underpin our experiences at work (Vince, 2008) and in so doing raise consciousness (Freire, 1970). Observations are a method of embodied and ‘situated inquiry’ (Reynolds & Vince, 2004) using live case studies which expose the unconscious dynamics and emotional experience of working in groups.

The use of workplace supervisions attempts to put participants’ emotions ‘within the activity itself’ (Trehan & Rigg, 2015) allowing expression and reflection about the emotional nature of work and of learning. Additionally, the analysis of fragments of experience, particularly unconscious experiences, allows for ‘learning from within’ (Cunliffe, 2003 :45) involving an acknowledgement of the unconscious and emotional aspects of our experiences of work and repositioning them as central to the learning process.

For this activity participants are asked to carry out a one hour observation either in a workplace or, as in this vignette, at an employment tribunal. During the observations participants are asked to simply observe, avoiding conversation or interaction and only writing notes immediately after their observation, based on whatever comes to mind, including their physical sensations, associations and reactions. In the supervision, after the observer has given their report, the tutor will then encourage participants to give their initial reactions and associations, allowing strands to emerge.

### **Vignette 2: The recognition of diversity**

This vignette involves a small cohort of eight students on a one year Masters HRM course in a UK university. Within the group there were tensions between participants who were 'working' and the perceived inexperience of the graduate scheme students. Two of the participants were experienced NHS human resource managers, both were white British and tended to dominate group discussions based on their seniority. My experience of both students was that they were able but had a tendency to be brittle in their responses to the emotional content of the course. Participant C was relatively hostile to complexity and had a particular preoccupation with long term sickness absence on the basis of mental health problems which was pronounced in their workplace. Four students were NHS graduate scheme human resource practitioners, two were British Asians and two from Eastern European countries.

This observation was presented by Participant B, a British Asian NHS graduate scheme student, who had been nervous and quiet during the course. The vignette relates to an employment tribunal of a South East Asian man appealing termination of

contract as a cleaner for a law firm, on the basis of race discrimination. This man was representing himself, with the law firm represented by two young Asian solicitors who were also employees. The tribunal panel consisted of the Chair, a white woman, and two men who were expert panel members. The observation took place on the first day of the case.

Participant B's observation described how the man had four plastic bags on the floor around his feet, full of paperwork. The man started to look through his bags, making a loud rustling noise as the tribunal members were speaking. After five minutes the Chair interrupted him and said "I can't hear anything because of this noise, please just tell me in your own words about your complaint". Participant B described with some tenderness how the man froze and the Chair, frustrated with him, asked the two lawyers to present their case. They spoke clearly and articulately, referring throughout to their folders of evidence. Participant B said "I just felt so heavy looking at his plastic bags full of stuff. It was just too messy to give his side of the story."

I started the discussion by picking up on the sound of the rustling bags and what that might be communicating. This background noise was blocking us hearing him – I wondered if this could be a communication about the background of discrimination that he faced, that he was telling us something about the difficulties of being heard. Participant C responded to this association by saying "Oh I think that's a bit far-fetched, he just didn't have enough money for a file. He wasn't communicating anything by rustling a bag, that's mad."

*I feel resigned to the familiar disregard of what I had said, and my attempts to free up the discussion by offering a provocative and ‘unprovable’ interpretation about the experience of racism. I respond by saying “What I felt was that he was telling us what it feels like to be dismissed”. [Angry silence from Participant C]*

I could have articulated the link between the dismissal of the problem of racism in this observation and the well documented institutional racism within the NHS. Instead I decided to make the link with the ‘dismissal’ of my interpretation as a way of bringing into focus the group dynamics in the room. I said “Often we can see organisational dynamics lived out in groups like these tribunals or our supervision group, such as different experiences or ideas being dismissed or rejected as ‘mad’ because they are different or raise difficult issues such as racism.” Part of the tutor’s role in encouraging critical learning is to offer interpretations, much like a therapist, using their emotions and free associations based on their experiences in the learning group itself (Dashtipour & Vidaillet, 2019). In this sense the role of the workplace supervisor is aligned to that of the therapist in providing articulations and raising questions about what is happening within the supervision group as a way of engaging with participants’ emotional experiences and helping them establish a link to the context within which they take place.

There was a short silence and then Participant B said “He was from the same country as my dad. I just felt sick that the judge wouldn’t understand how humiliating it was for a man of his age to be treated like he was ignorant by these women. They were Asian too, really slick. I guess it can’t be about race then can it? Can Asians be

racist to other Asians?” Participant B looked excited and surprised that she had been able to ask this question.

This moment of consciousness raising felt like a breakthrough for this student who was genuinely surprised by what they had just articulated. The introduction of the idea that difference exists both within and between racial groups had the effect of triggering associations within the group about power and privilege and an exploration of their experiences of discrimination at work on the basis of race but also more broadly to gender and class. Although only temporary within this cohort, the experience of being in this ‘liminal’ space (Wright & Hibbert, 2019) of the supervision group, one that moves between emotions and associations, had allowed some change in the group dynamics from ‘rationalisation as a prominent defensive mechanism’ (Vince, 2008:95), predominantly by taking an ‘HRM’ position, towards one where participants were more able to recognise and tolerate diverse experiences and positions within the group.

### **Stage 3: PIP Collective Planning**

PIP methods prioritise techniques designed to build collective processes that can help to mobilise collective actions. The third and final stage of the PIP model involves collective planning in response to workplace problems, such as in this example barriers to staff wellbeing, as they are defined in Stage 1 by the participants. This can be organised in a number of ways, both as small group and whole group discussions, where whatever is agreed during this activity is a collective plan of action and forms the basis for subsequent evaluations.

The activity used in this vignette is one attributed to the UK psychoanalyst William Halton, where a participant is asked to depict and talk about a workplace problem in five to ten minutes. The purpose of depiction is to make visible the dynamics and systems that are involved in a workplace problem in order to help the group identify potential actions that might address them. The group is asked to respond to the picture, saying what ‘struck’ them or came to mind, for fifteen or more minutes followed by an exercise in collective planning that responds to the issues that have emerged.

***Vignette 3: What can we do about wellbeing?***

An issue that had come up during this trade union leadership course was related to the level of membership distress that union representatives were having to deal with, often leading to mental health problems and burnout of key activists. Although the group was familiar with the PIP model, participants often felt self-conscious about engaging in ‘touchy-feely’ activities.

Participant D was an experienced activist who was trying to develop a national wellbeing programme within their union but experiencing organisational blocks. Participant D stood next to the flip-chart unable to draw a depiction of the problem he faced in his union. Becoming increasingly frustrated he said, “Look, I just can’t draw. I can’t do it”. Another participant laughs and says how awful he is at drawing himself. Another participant explains he is dyslexic and it is easier to draw pictures than to write. Participant D responds by saying “I just don’t understand it, I’m normally so cool and collective (sic). Right now, I’m just, well, really angry. I’m actually angry. I don’t know what to do about it”.

*I feel embarrassed that I have made him do a 'middle class' activity like drawing based on my needs to use these methods not his. I'm struck by Participant D's slip in saying he is 'collective' and start to think about the fragility of being 'in the union' even though the other participants had tried to encourage him.*

My association is linked to an aspect of activist cultures which tend to de-emphasise understanding and reflection as opposed to action (Rigg & Trehan, 2004). The anxiety behind Participant D's slip may be about exposing the tensions that exist in trade unions, and the difficulties experienced by activists in looking critically at their organisations while maintaining an ethos of solidarity.

Unexpectedly Participant D starts to draw, and talk about his father's recent death and how he did not take any compassionate leave from the hospital he worked in. He highlighted the lack of compassion he had experienced from his own union saying, "Everyone just expected me to get on with it. As soon as I said I was angry they just backed off". His drawing was made up of small isolated black figures representing him, colleagues and managers with no attempt to join them up or depict their relationships. In the discussion, the group talked about the pressure to paint a 'pretty picture' in their union, with Participant D saying "I'm really angry that I've been put in this position. It's so obvious that people are really suffering at work and we're supposed to be all happy clappy about it. I guess I'm just worried that everyone will hate me if I let them see how angry I am".

*I feel relief that he was able to say this. I say “Don’t you think it’s possible that they might not hate you, but empathise with how you feel?”.*

In the discussion that followed participant D talked of his experience of being put into ‘anger management’ as a result of talking about his feelings of anger and his sense that his experience was too difficult to raise (Rigg and Trehan, 2008) within the union. Participant D’s reference to the pressure to be ‘happy clappy’ may have indicated his anxieties about being pushed out of the union as a result of raising his concerns about how emotionality was handled, despite the paradox that this would have represented given the role of the union movement in handling workers’ distress.

The authenticity and resonance of Participant D’s statement enabled the group to hold an important discussion about the role of trade unions to engage with activists and members on an emotional level and to represent members’ experiences, including feelings of anger. In the second part of the activity the participants collectively planned a wellbeing campaign, designed around the organisational issues faced by Participant D and utilising the campaigning experience of the group. The wellbeing campaign included developing a peer mentoring system where participants would be encouraged to ‘let off steam’ putting the emotional experience of anger in centre place. The campaign focussed on workplace inequalities and the link between insecurity and low wellbeing so that workers’ feelings of anger about the impact of poor working conditions were used to form a ‘call to action’ (Hibbert et al., 2019) and a mobilising force for collective action, rather than a cause for shame or exclusion.

## **DISCUSSION: INDIVIDUALISM & RELATIONALITY IN THE WELLBEING DEBATES**

Long before the Coronavirus crisis, the impact of structural and financial pressures to deliver healthcare in a context of reduced staffing levels, work intensification (Boxall & Macky, 2014) and the consistent rise in temporary, non-clinical and externalised labour and de-professionalisation of clinical roles (Dunleavy & Carrera, 2013) has been linked to low levels of staff wellbeing (Chandola & Zhang, 2017; Gallie et al., 2017). The combination of nationally set targets, which in the UK relate to the government's austerity policies since 2008, and New Public Management (NPM) practices that focus on the delivery of these data driven targets has had important consequences. These include the rise of 'command and control' management techniques and a widespread establishment of bullying cultures within the healthcare sector (Cotton, 2017a; Francis, 2013), creating a highly challenging climate for staff wellbeing.

In the UK context, workplace wellbeing programmes have broadly adopted a model of positive psychology, founded on the work of Martin Seligman (2011), and promoted through the 'science of happiness' research of the economist Richard Layard (2011). The operational bias towards a context-free formulation of wellbeing centres on an individualising concept of development (Reynolds, 1999a) and results in a model of wellbeing that focusses on individual psychological techniques. Consequently, positive psychology allows for a 'rationalization and technocratization' (Dehler, 2009:34) of wellbeing responses, such that complex organisational work is reduced to applying individual psychological interventions.

Political and sociological critiques are emerging (Cederstrom & Spicer, 2015) that situate wellbeing within the context of neoliberal institutional settings to explain this formulation of wellbeing as a ‘politically convincing technology’ (Freidli & Stern, 2019:85). But despite the rise in health inequalities literature (Marmot, 2020) and the emergence of radical critiques, characterised in the ‘McMindfulness’ (Purser, 2019) debate, the dominance of this formulation of wellbeing has yet to be substantially challenged in the workplace.

Presented here in contrast, the PIP model offers a critical and action oriented method of learning premised on a relational ontology (Kurucz et al., 2014) where relationality can be established as an organising principle (Cotton, 2017b) for promoting wellbeing at work. PIP encourages relationality by helping to establish relational knowledge (Park, 1999) such that the outcomes of the learning process are collectively defined and carried out. The three vignettes show us that these learning groups can offer a ‘microcosm’ of wider organisational dynamics, and expose how staff navigate them through the ‘micro-processes and micro-politics of everyday interactions’ (Rigg, 2008: 109).

As explored in Vignette 1, there is a process of realignment involved in the participants moving from a defence of withdrawal they were using to avoid ‘taking sides’ on the problem of bullying to one where they had started to engage with each other on the impending relocation of services and how to protect the CAMHS service where they worked, an issue that offered some common ground and a way of re-establishing working relationships. Vignette 2 shows a shift in small group dynamics where the articulation of emotional and unconscious material allows the participants to move from blocking diverse experiences to a recognition of difference and its value in man-

aging work groups. Vignette 3 raises the impact of incorporating emotional experiences and feelings of vulnerability into discussions such that interdependency and the value of collective resourcefulness can be understood and utilised as a basis for collective action.

Critical and action learning traditions emphasise the relational impact of working collectively to solve workplace problems (Reynolds & Vince, 2004). The dual meaning of Freire's notion of conscientisation involves both a raised consciousness as well as a form of conscience where a bond and commitment is developed towards the collective plan, and the shared principles that underpin it. Relationality is therefore based on the "recurring realignment" (Park, 1999) of relationships within groups that takes place as a result of this commitment to shared principles and actions. PIP participants learn about and examine each other's experiences and in so doing engage in ways that can be highly humanising (Raelin, 2006) and, in the language used in trade union contexts, encourage solidaristic relationships (Cotton, 2017b).

Relationality, as seen in all three vignettes, is established, in part, by the innovation that can be generated and subsequent appreciation of the value of other people's 'resourcefulness' (Armstrong, 2012). Relational bonds are formed by utilising participants' diverse experiences and capacities, creating a confidence in the usefulness of relationality, which can in turn lead to a stronger sense of collective responsibility for the implementation of whatever plan is agreed (Raelin, 2006). This is not to deny that conflict and tensions within groups remain, rather that participants can be 'adversaries with commonality' such that relationships are formed on the basis of a common adversity and an acknowledgement of "what is positive in togetherness"

(Vince, 2004: 64), a valuable resource in the current context where healthcare workers' wellbeing is under sustained attack.

It has been proposed that the wellbeing agenda invites participants to explore emotional and systemic factors impacting staff wellbeing and therefore offers potential for engaging in critical reflection that questioning the 'taken-for-granted' (Reynolds, 1999a: 539). Further, that CAL offers a critical and relational approach to wellbeing at work where systemic factors can be collectively addressed.

### **CONCLUSIONS AND FUTURE PRACTICE: A CRITICAL WELLBEING MODEL**

The adequacy of wellbeing initiatives to address the realities of frontline healthcare workers is likely to come under close scrutiny in the fallout of the Coronavirus crisis, and a significant driver of mental health and wellbeing research agendas. Within this painful process of recovery, the potential for challenging old models of care (Kurucz et al., 2014) may become realised, opening up a space for the utilisation of alternative wellbeing models.

Decontextualised and individualistic positive psychology is favoured as an approach to wellbeing because it leaves organisational and management systems unchallenged and unchanged. Positive psychology's focus on procedural knowledge, skills and techniques underplays complexity and group dynamics (Armstrong, 2012), prioritising instead promotion of 'positive behaviours' and, subsequently, governability. This depoliticisation of the wellbeing agenda can be keenly felt by healthcare workers, many of whom are engaged in therapeutic and relational work, exhibited in their often cynical and disengaged attitudes to wellbeing programmes (Cotton, 2017a).

Viewed from a critical perspective, addressing the causes of low wellbeing amongst healthcare workers necessarily involves an analysis of the systemic factors and power dynamics within which they operate. It has been argued that the wellbeing agenda provides a ‘relatively safe laboratory for learning’ (Marsick & O’Neil, 1999: 170) where a critical action learning framework can be utilised. The strategy outlined in this article of locating PIP within a wellbeing framework can involve a risk of what Raelin calls ‘cultural doping’ (Raelin, 2008) and, as with any developmental process, PIP can be reduced to a technique rather than a ‘philosophy-driven process’ (Cunliffe, 2004:408). However, we can anticipate a growing resistance to positive psychology and individualistic and technical ‘solutions’ to the wellbeing of frontline healthcare staff following the complexities and uncertainties raised by the Coronavirus crisis, thus creating a potential space for critical and action learning to take place.

### ***References***

- Armstrong, D. 2012. Terms of Engagement: Looking backwards and forwards at the Tavistock Enterprise. *Organisational and Social Dynamics*, 12(1): 106-121.
- Berends, H., & Deken, F. 2019. Composing qualitative process research. *Strategic Organization*, DOI: 10.1177/1476127018824838.
- Bion, W.R. 1970. *Attention and Interpretation*. London: Karnac.
- Bion, W.R. 1961. *Experiences in Groups and Other Papers*. London: Tavistock Publications Ltd.
- Boxall, P., & Macky, K. 2014. High-involvement work processes, work intensification and employee well-being. *Work, Employment and Society*, 28(6): 963-984.

- Canham, H. 2002. Group and gang states of mind. *Journal of Child Psychotherapy*, 28(2): 113-127.
- Cederstrom, C., & Spicer, A. 2015. *The Wellness Syndrome*. Cambridge: Polity Press.
- Chandola, T., & Zhang, N. 2017. Re-employment, job quality, health and allostatic load biomarkers: prospective evidence from the UK Household Longitudinal Study. *International Journal of Epidemiology*, DOI: 10.1093/ije/dyx150.
- Cotton, E. 2017a. *Surviving Work in Healthcare: Helpful stuff for people on the frontline*. London: Taylor & Francis.
- Cotton, E. 2017b. Constructing Solidarities at Work: Relationality and the methods of emancipatory education. *Capital & Class*, 42 (2): 315-331.
- Croucher, R. & Cotton, E. 2011. *Global Unions Global Business: Global Union Federations and International Business*. Second Edition. London: Libri Publishing.
- Cotton, E. & Royle, T. 2014. Transnational Organising: A case study of contract workers in the Colombian mining industries. *British Journal of Industrial Relations*, 52(4): 705-724.
- Cox, J.W., & Hassard, J. 2018. From Relational to Relationist leadership in Critical Management Education: Recasting leadership work after the practice turn. *Academy of Management Learning & Education*, 17(4): 532-556.
- Cunliffe, A. 2018. Alterity: The passion, politics, and ethics of self and scholarship. *Management Learning*, 49(1): 8-22.
- Cunliffe, A. 2004. On becoming a critically reflexive practitioner. *Journal of Management Education*, 28(4): 407-426

- Cunliffe, A. 2003. Reflexive inquiry in organizational research: Questions and possibilities. *Human Relations*, 56(8): 983-1003.
- Dashtipour, P. & Vidaillet, B. (2019) Introducing the French Psychodynamics of Work Perspective to Critical Management Education: Why do the task and the organisation of work matter? *Academy of Management Learning & Education*, DOI: 105465/amle.2018.0128.
- Dehler, G. 2009. Prospects and possibilities of critical management education: Critical beings and a pedagogy of critical action. *Management Learning*, 40(1): 31-49.
- Dunleavy, P., & Carrera, L. 2013. *Growing the Productivity of Government Services*. Cheltenham: Edward Elgar.
- Evans, M. 2015. “I’m beyond caring”: a response to the Francis Report. In D. Armstrong, & M. Rustin (Eds.). *Social Defences Against Anxiety: Explorations in a paradigm*: 124-143. London: Karnac.
- Francis, R. 2013. *The Mid Staffordshire NHS Foundation Trust Public Inquiry Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry HC 947*. London: The Stationary Office.
- Freidli, L. & Stern, R. 2019. Positive affect as coercive strategy: conditionality, activation and the role of psychology in UK government workfare programmes. In Risq, R. & Jackson, C. Eds. 2019. *The Industrialisation of Care*. London: PCCS Books.
- Freire, P. 1970. *Pedagogy of the Oppressed*. New York: Continuum Books.
- Gallie, D., Felstead, A., Green, F., & Inanc, H. 2017. The hidden face of job insecurity. *Work, employment and society*, 31(1): 36– 53.
- Gherardi, S. 2019. Theorizing affective ethnography for organization studies. *Organization*, 26(6): 741–760.

- Hanlon, N., Reay, T., Snadden, D. & MacLeod, M. 2019. Creating Partnerships to Achieve Health Care Reform: Moving Beyond a Politics of Scale? *International Journal of Health Services*, 49(1): 51-67.
- Hibbert, P., Callagher, L. et al. 2019. (Engaging or Avoiding) Change Through Reflexive Practices. *Journal of Management Inquiry*, 28(2): 187-203.
- Hibbert P (2012) Approaching Reflexivity Through Reflection: Issues for Critical Management Education. *Journal of Management Education*, 37(6) :803–827.
- Jarzabkowski, P., & Bednarek, R. 2014. Producing persuasive findings: Demystifying ethnographic text work in strategy and organization research. *Strategic Organization*, 12(4): 274-287.
- Kraemer, S. 2015. Anxiety at the front line. In D. Armstrong, & M. Rustin (Eds.). *Social Defences Against Anxiety: Explorations in a paradigm*: 144-160. London: Karnac.
- Kurucz, E.C., Colbert, B.A. & Marcus, J. 2014. Sustainability as a provocation to re-think management education: Building a progressive educative practice. *Management Learning*, 45(4): 437– 457.
- Layard, R. 2011. *Happiness: Lessons from a new science*. London: Penguin.
- Learmonth, M. & Humphries, M. 2011. Autoethnography and academic identity: glimpsing business school doppelgängers. *Organization* 19(1): 99-117.
- Learmonth, M. 2007. Critical Management Education in Action: Personal Tales of Managing Unlearning. *Academy of Management Learning and Education*, 6(1): 109-113.
- Marmot, M. (2020). *Health Equality in England: The Marmot Review 10 years on*. The Institute of Health Inequality. Available at: <https://www.health.org.uk/sites/default/>

files/upload/publications/2020/

Health%20Equity%20in%20England\_The%20Marmot%20Review%2010%20Years%20On\_-full%20report.pdf (Accessed 6 April 2020).

Marsick, V. J., & O'Neil, J. 1999. The Many Faces of Action Learning. *Management Learning*, 30(2): 159–176.

Park, P. 1999. People, Knowledge, and Change in Participatory Research. *Management Learning*, 30(2): 141–157.

Pederzini, G. & Barraza, M. 2019. Just let us be: Domination, the postcolonial condition and the global field of business schools. *Academy of Management Learning & Education*, DOI:10.5465/amle.2018.0016.

Purser, R. 2019. *McMindfulness: How Mindfulness Became the New Capitalist Spirituality*. London: Repeater Books.

Raelin, J. A. 2008. Emancipatory Discourse and Liberation. *Management Learning* 39(5): 519–540.

Raelin, D. 2006. Does Action Learning Promote Collaborative Leadership? *Academy of Management Learning & Education*, 5(2): 152–168.

Revans, R.W. 1982. *The Origins & Growth of Action Learning*. Bromley: Chartwell Bratt.

Reynolds, M. 1999a. Critical reflection and management education: rehabilitating less hierarchical approaches. *Journal of Management Education*, 23(5): 537-553.

Reynolds, M. 1999b. Grasping the nettle: Possibilities and pitfalls of a critical management pedagogy. *British Journal of Management*, 10(2): 171–184.

- Reynolds, M., & Vince, R. 2004. Critical Management Education and Action-Based Learning: Synergies and Contradictions. *Academy of Management Learning & Education*, 3(4): 442–456.
- Rigg, C. 2008. Action learning for organizational and systemic development: towards a ‘both-and’ understanding of ‘I’ and ‘we’. *Action Learning: Research and Practice*, 5(2): 105-116.
- Rigg, C. & Trehan, K. 2008. Critical reflection in the workplace: is it just too difficult? *Journal of European Industrial Training*, 32(5): 374-384.
- Rigg, C & Trehan, K. 2004. Reflections on working with critical action learning. *Action Learning: Research & Practice*, 1(2): 149–165.
- Seligman, M.E.P. 2011. *Flourish: A New Understanding of Happiness and Well-Being and How To Achieve Them*. London: Nicholas Brearley Publishing.
- Spencer B (ed) (2002) *Unions and Learning in a Global Economy: International and Comparative Perspectives*. Toronto: Thompson Educational Publishing.
- Steiner, J. 1993. *Psychic Retreats. Pathological organisations in psychotic, neurotic and borderline patients*. London: Routledge.
- Trehan, K.R., Anderson, L. & Rigg, C. 2018. Critical Action Learning. *Management Learning*, 49(1): 67-68.
- Trehan, K., & Rigg, C. 2015. Enacting critical learning: power, politics and emotions at work. *Studies in Higher Education*, 40(5): 791–805.
- Vince, R., Abbey, G., Langenhan, M., & Bell, D. 2018. Finding critical action learning through paradox: The role of action learning in the suppression and stimulation of critical reflection. *Management Learning*, 49(1): 86–106.

- Vince, R. 2008. 'Learning-in-action' and 'learning inaction': Advancing the theory and practice of critical action learning. *Action Learning: Research & Practice*, 5(2): 93–104.
- Vince, R. 2004. Action learning and organisational learning: Power, politics, and emotion in organization. *Action Learning: Research and Practice*, 1(1): 63–78.
- Vince, R. 2002. Organizing reflection. *Management Learning*, 33(1): 63–78.
- Vince, R. 2001. Power and emotion in organizational learning. *Human Relations*, 54 (10): 1325–1351.
- Wang, C., Horby, P.W., Hayden, F.G., et al. 2020. A novel coronavirus outbreak of global health concern. *The Lancet*. Published online Jan 24. [https://doi.org/10.1016/S0140-6736\(20\)30185-9](https://doi.org/10.1016/S0140-6736(20)30185-9). (Accessed 6 April 2020).
- White, S. 2013. *An Introduction to the Psychodynamics of Workplace Bullying*. London: Karnac Books Ltd.
- Wilkinson, E. 2015. UK NHS staff: stressed, exhausted, burnt out. *The Lancet*, 385(9971): 841-842.
- Willmott, H. 1997. Making Learning Critical: Identity, emotion, and power in processes of management development. *Systems Practice*, 10(6): 749-770.
- Wright, A. & Irving, G. 2019. Threshold concept learning: Emotions and liminal space transitions. *Management Learning*, 50(3): 355–373.