UP CLOSE AND PERSONAL: ENGAGING LEARNERS WITH SERVICE USER KNOWLEDGE

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Biographical Note

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KEYWORDS

Threshold concepts, social work education, service user knowledge, tangible knowledge

ABSTRACT

This paper reports on the benefits gained from the creation of a high-challenge learning environment within one module of a professional social work degree programme. In a module entitled Mental Health and Social Work for final year social work students, the traditional classroom landscape was transformed (and the safety perch of the lecturer-as-expert unseated) when two representatives of a mental health service-user organisation accepted an invitation to audit the module's content and delivery. As part of conducting the audit, the service-users reviewed the module handouts, assignment guidelines and lecture content. They also sat in on all the lectures.

Appreciating the value of the service-user perspective and service-user feedback on service delivery is a threshold concept in social work. It is mandated by law in certain jurisdictions, such as Northern Ireland, that social work degree programmes promote service-user perspectives in the curriculum. Yet, for students it is an elusive and hard-to-grasp concept which can be perceived as ill-defined and ambiguous. Finding ways to represent the views or the 'voice' of service-users in education of professional disciplines (not just social work but many other professions also) has consequently confronted lecturers and students alike with challenges of definition, conceptual understanding and application. This experimental audit of a module by two mental health service users threw out the traditional rule-book on boundaries between expert and learner. Students, lecturer and service-users bravely embarked on a journey together into the uncharted territory of service-user involvement in the classroom. This paper reports on the transformative, irreversible, integrative and profoundly knowledge-changing elements of that journey for all concerned....so far.

"When people not used to speaking out are heard by people not used to listening, then real changes can be made" (Western Health Board, 2002, p. 10).

INTRODUCTION

This paper outlines a teaching strategy, developed with reference to threshold concepts theory, which was adopted in a module on mental health social work. Among a number of learning outcomes, the module set out to build student knowledge regarding the benefits of including service user knowledge in healthcare planning and service delivery and to highlight for learners the rich and insightful knowledge that mental health service users hold. Ferguson and Ager (2008, p. 71) refer to 'specific knowledges' carried by service users about their experience and they stress the importance of ensuring that the voices of service users are 'not silenced or excluded' from the assessments and decisions that shape their futures or define their pasts. In order to be able to work inclusively in this way with service users it is essential that social work students appreciate the value of the knowledge, gained from their lived experience, which service users bring into their consultations with professionals. A second aim of the module was to demonstrate, in practical terms, how service user knowledge can be used to inform and improve professional practice.

Viewing service user knowledge through a threshold theory lens unveiled its status as a threshold concept in social work and helped the author, in her role as lecturer, think about the creation of a learning environment in which transformative and integrative learning could take place. By grasping the nature and relevance of service user knowledge, the learner will navigate a conceptual portal (Meyer and Land, 2003) to discover a bigger vista wherein lies the potential for service user knowledge to inform the development of services which are responsive to service user needs. A further consideration for the social work educator is how service user knowledge as a concept can be rendered "tangible" (Kinchin et al., 2010, p. 83) so that learners can understand it, utilize it and integrate it into their work.

In the sections that follow, this paper deals firstly with the policy and practice arguments which favour the promotion of service user knowledge at all levels of health care planning and delivery. It then outlines the teaching approach adopted in a social work module that aimed to place the knowledge of mental health service users in a central position. It considers how effective the module was at providing the opportunity for transformative, irreversible and integrative learning on service user knowledge.

SERVICE USER KNOWLEDGE IN POLICY AND PRACTICE

Within the literatures on disability rights (Oliver, 1990) and the social model in mental health (Beresford, 2002), there is a call for professionals to incorporate into their work respect for service user knowledge (Beresford and Boxall, 2012; Oliver, 2004). If social workers are to privilege the knowledge of service users in their work, they must first understand its importance, derived as it is from the subjective experiences of individual service users and service user collectives.

At a policy level, the imperative to engage with service user knowledge is articulated across a wide range of policy documents and reports in various jurisdictions (for example, Australian Commission on Safety and Quality in Healthcare, 2010; DoH, 2000; DoHC, 2008). The identified benefits for services that flow from engagement with service user knowledge include enhanced quality assurance, improved service performance, greater accountability, better targeted service delivery and better outcomes (McEvoy et al., 2008). As McPhail and Ager (2008, p. 3) suggest, service user

knowledge can contribute to enhanced service delivery which they describe as "more responsive, integrated services for the benefit of service users and carers".

From a service user perspective, having their views and experiences taken seriously may help improve services but more importantly, it may also help improve their lives by tackling stigma and discrimination (Weinstein, 2010), by influencing resource distribution and by challenging power inequalities (Beresford, 2012; Webb, 1994).

However, in a classroom context, defining and explaining the concept 'service user knowledge' is not straightforward. It takes us into the realm of concrete knowledge, as described by Newman (1874, 1979). For Newman, knowledge derived from experience is distinguishable from notional/abstract knowledge and has important ontological and epistemological qualities that help us better understand the nature of our world. In line with Newman's categorization, the concrete knowledge gained from experience is of the real world, is far from static and comes in many forms. It cannot be reduced to a simple formula. Understanding the deep level knowledge that service users hold requires practitioners to appreciate the ontological and epistemological basis (how we know what we know) of the service user perspective. However, in the language of threshold concept theory, service user knowledge is a 'troublesome' or complex concept (Meyer and Land, 2003, p. 5) because it represents not one singular entity but rather a spectrum of experiences. Helping students engage with it, therefore, stretches educators to steer students through a complex conceptual portal.

TEACHING ABOUT SERVICE USER PERSPECTIVES

To assist learners engage more easily with 'service user knowledge' as a concept, an innovative strategy was introduced into one module in an undergraduate social work degree programme. It entailed two mental health service users acting as auditors of the 'Mental Health and Social Work' module for final year students. The auditors reviewed all the module documentation (module descriptor, presentations, handouts, assessment outline), observed every lecture and provided feedback on how the module content could be improved. The presence of the auditors in the classroom, of itself, created a high-impact learning environment and the traditional classroom landscape was transformed. It brought mental health service user knowledge centre-stage into the classroom setting – achieving an 'up close and personal' exchange between educator, students and service users.

The auditor role was not a passive one. It was envisaged from the start that the auditors would comment and contribute to the class discussions. Students listened to service users speak with authority on the mental health issues that had affected their lives and how useful (or otherwise) they had experienced professional services and interventions. With the auditors present in each lecture throughout the module, there were many opportunities for gaps in the module content (as designed by the lecturer) to be exposed. Kinchin et al. (2010, p. 83) state that:

"the adoption of an expertise-based pedagogy requires teachers to have the courage to share their knowledge, and the gaps in their knowledge".

Of particular note was the difference regarding what module content the lecturer and the service users regarded as important. The auditors identified a number of topics which, from a service user perspective, deserved greater amplification and more in-depth elaboration within the module. For

example, the recovery model in mental health (Anthony, 1993) was included in the module but the service users suggested that 'why' the recovery model holds importance for service users deserved extended coverage. Students observed the interaction between the lecturer and the service users on this and other issues. The involvement of mental health service users in every aspect of the module effectively discarded the traditional rule-book of lecture-based teaching and loosened the boundaries between expert and learner. Ferguson and Ager (2008) cite Evans and Fisher's (1999, p. 63) observation that:

"involving service users in teaching social work brings not only immediacy to the learning but a reshaping of the notion of expertise".

Within the module, students experienced transformation of their own knowledge base but they also witnessed the transformative impact on the lecturer's knowledge base arising directly from the lecturer's openness to engaging with and being informed by service user knowledge. Students contributed to the class discussions, asking questions or making links between the module content and their own personal or work experiences. The presence of the auditors helped create a bridge between the outside world and the classroom and this provided an integrative learning opportunity. The voice of the service user was in the classroom and students not only had to think about it, they had to engage with it. Students, carrying their own understandings about mental health, were invited to revisit some of the 'truths' they previously held about how mental health difficulties impact on peoples' lives. The service users prompted the students to think again about how well they listen to service users, what they write in case files based on that information, how they evaluate their own practice and how they could better integrate service user knowledge into that evaluation. Furthermore, students' understandings about what service users want from services were among many topics that were unpicked, critiqued or irreversibly deconstructed during class discussion.

As Timmermans (2010) points out, it is not always certain how students have journeyed through the conceptual portals to which they have been introduced. With regard to the module discussed here, anonymous student feedback provided some insight into how the module helped develop student knowledge. Some students reported a shift in how they conceptualized mental health. They found that the module content and the opportunity to engage with service user knowledge in particular, encouraged them to consider the potential of alternative paradigms to the biomedical perspective (which places an emphasis on individual illness and pathology). Some students reported that the distinctions between contrasting paradigms of mental health were clearer for them on completion of the module. Some students reflected on how they would carry forward greater respect for service user knowledge into their work. Students also reported heightened awareness of the difficulties that mental health service users encounter in getting their views heard. Across the feedback, students connected what they had enjoyed or found useful in the module to how it would impact on their future practice as social workers.

CONCLUSION

Students on professional education programmes, such as the one in the case example here, will one day work in a social work role with service users. Farrell (2010, p. 20) reminds us that social work can be more responsive to the needs of service users if it is informed by service user knowledge. A challenge for social work educators is to help students appreciate and understand the importance of

listening to service users in the assessments and decisions that affect their lives. However, as Beresford and Boxall (2012) indicate, service users are not a homogenous group and while they may have some shared knowledge they also each have their own unique set of experiences. Therefore, service user knowledge is diverse, varied and multifaceted. It is not something that can be learnt by students in a formulaic way and often for students it appears intangible.

Identifying service user knowledge as a threshold concept, it is concluded, drew the lecturer towards a teaching strategy that acknowledged the complexity of it as a concept and recognized the need to help students 'get it'. It flagged the need to think pedagogically about how best to make this concept 'tangible' for students. By embedding service user knowledge into the structure and fabric of the module, a transformative and integrative learning environment was created. This environment supported a 'letting go' of previously held beliefs, not only on the part of the students, but also on the part of the lecturer, whose own conceptual framework was developed and enhanced by listening to and being open to the wisdom of service user knowledge.

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