

## CHAPTER 16

# THE PRACTICE OF CO-OPERATIVE INQUIRY: RESEARCH WITH RATHER THAN ON PEOPLE<sup>i[i]</sup>

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Co-operative inquiry is a way of working with other people who have similar concerns and interests to yourself, in order to:

- Understand your world, make sense of your life and develop new and creative ways of looking at things.
- Learn how to act to change things you may want to change and find out how to do things better<sup>ii[ii]</sup>.

Research is usually thought of as something done by people in universities and research institutes. There is a researcher who has all the ideas, and who then studies other people by observing them, asking them questions, or by designing experiments. The trouble with this kind of way of doing research is that there is often very little connection between the researcher's thinking and the concerns and experiences of the people who are actually involved. People are treated as passive subjects rather than as active agents. We believe that good research is research conducted with people rather than on people. We believe that ordinary people are quite capable of developing their own ideas and can work together in a co-operative inquiry group to see if these ideas make sense of their world and work in practice.

A second problem with traditional research is that the kind of thinking done by researchers is often theoretical rather than practical. It doesn't help people find how to act to change things in their lives. We believe that the outcome of good research is not just books and academic papers, but is also the creative action of people to address matters that are important to them. Of course, it is concerned too with revisioning our understanding of our world, as well as transforming practice within it.

So in traditional research on people, the roles of researcher and subject are mutually exclusive: the researcher only contributes the thinking that goes into the project, and the subjects only contribute the action to be studied. In co-operative inquiry these exclusive roles are replaced by a co-operative relationship, so that all those involved work together as co-researchers and as co-subjects. Everyone is involved in the design and management of the inquiry; everyone gets into the experience and action that is being explored; everyone is involved in making sense and drawing conclusions; thus everyone involved can take initiative and exert influence on the process. This, as we have said, is not research on people or about people, but research with people. We summarize the defining features of co-operative inquiry—on which we elaborate as the chapter proceeds—as follows: All the active subjects are fully involved as co-researchers in all research decisions - about both content and method - taken in the reflection phases.

- There is intentional interplay between reflection and making sense on the one hand, and experience and action on the other

- There is explicit attention, through agreed procedures, to the validity of the inquiry and its findings. The primary procedure is to use inquiry cycles, moving several times between reflection and action.
- There is a radical epistemology for a wide-ranging inquiry method that integrates experiential knowing through meeting and encounter, presentational knowing through the use of aesthetic, expressive forms, propositional knowing through words and concepts, and practical knowing—how in the exercise of diverse skills—intrapsychic, interpersonal, political, transpersonal and so on. These forms of knowing are brought to bear upon each other, through the use of inquiry cycles, to enhance their mutual congruence, both within each inquirer and the inquiry group as a whole.
- There are, as well as validity procedures, a range of special skills suited to such all-purpose experiential inquiry. They include fine-tuned discrimination in perceiving, in acting and in remembering both of these; bracketing off and reframing launching concepts; and emotional competence, including the ability to manage effectively anxiety stirred up by the inquiry process.
- The inquiry method can be both informative about, and transformative, of any aspect of the human condition that is accessible to a transparent body-mind, that is, one that has an open, unbound awareness.
- Primacy is given to transformative inquiries that involve action, where people change their way of being and doing and relating in their world—in the direction of greater flourishing. This is on the grounds that practical knowing-how consummates the other three forms of knowing—propositional, presentational and experiential—on which it is grounded.

- The full range of human capacities and sensibilities is available as an instrument of inquiry.

A co-operative inquiry cycles through four phases of reflection and action. In Phase 1, a group of co-researchers come together to explore an agreed area of human activity. They may be professionals who wish to inquire into a particular area of practice; couples or families who wish to explore new styles of life; people who wish to practise in depth transformations of being; members of an organization who want to research restructuring it; ill people who want to assess the impact of particular healing practices; and so on. In the first part of Phase 1, they agree on the focus of their inquiry, and develop together a set of questions or propositions they wish to investigate. Then they plan a method for exploring this focal idea in action, through practical experience. Finally, in Phase 1, they devise and agree a set of procedures for gathering and recording data from this experience: diaries, self-assessment rating scales, audio or video recordings, feedback from colleagues or clients, etc.

For example, a group of health visitors in south west England were invited by one of their colleagues to form an inquiry group to explore the sources of stress in their work (Traylen, 1994). After some resistance to the idea that they could be ‘researchers’, the group decided to explore the stress that comes from the ‘hidden agendas’ in their work—the suspicions they had about problems such as depression, child abuse, and drug taking in the families they visit which are unexpressed and unexplored.

In Phase 2 the co-researchers now also become co-subjects: they engage in the actions they have agreed; and observe and record the process and outcomes of their own and each other's action and experience. They may at first simply watch what it is that

happens to them so they develop a better understanding of their experience; later they may start trying out new forms of action. In particular, they are careful to notice the subtleties of experience, to hold lightly the conceptual frame from which they started so that they are able to see how practice does and does not conform to their original ideas.

The health visitors first explored among themselves their feelings about their 'hidden agendas' and how they were managing them at that time. They then decided to experiment with confronting them. Through role play, they practised the skills they thought they would need, and then agreed to try raising their concerns directly with their client families.

Phase 3 is in some ways the touchstone of the inquiry method. It is a stage in which the co-subjects become full immersed in and engaged with their action and experience. They may develop a degree of openness to what is going on so free of preconceptions that they see it in a new way. They may deepen into the experience so that superficial understandings are elaborated and developed. Or their experience may lead them away from the original ideas into new fields, unpredicted action and creative insights. It is also possible that they may get so involved in what they are doing that they lose the awareness that they are part of an inquiry group: there may be a practical crisis, they may become enthralled, they may simply forget. It is this deep experiential engagement, which informs any practical skills or new understandings which grow out of the inquiry, that makes co-operative inquiry so very different from conventional research. The health visitors' experience of trying out new ways of working with clients was both terrifying and liberating in ways none of them had expected. On the one hand they felt they were really doing their job; on the other hand they were concerned about the depth

of the problems they would uncover and whether they had adequate skills to cope with them. In particular, the woman who had initiated the project in particular was anxious and had disturbing dreams. The group members found they had to keep in good contact with each other to provide support and reassurance as they tried out new behaviours.

In Phase 4, after an agreed period in Phases 2 and 3, the co-researchers re-assemble to share—in both presentational and propositional forms—their practical and experiential data, and to consider their original ideas in the light of it. As a result they may develop or reframe these ideas; or reject them and pose new questions. They may choose, for the next cycle of action, to focus on the same or on different aspects of the overall inquiry. The group may also choose to amend or develop its inquiry procedures—forms of action, ways of gathering data—in the light of experience.

The health visitors came back together and shared their experience, helping each other understand what had taken place and developing their strategies and skills at confronting hidden agendas. After several cycles they reflected on what they had learned and wrote a report which they circulated to their managers and colleagues.

So the cycle between reflection and action is repeated several times. Six to ten cycles may take place over a short workshop, or may extend over a year or more, depending on the kind of questions that are being explored. These cycles ideally balance divergence over several aspects of the inquiry topic, with convergence on specific aspects, so that there is a refined grasp of both the whole and its parts. Experiential competencies are realized; presentational insights gained; ideas and discoveries tentatively reached in early phases can be checked and developed; skills are acquired and monitored; investigation of one aspect of the inquiry can be related to exploration of

other parts; the group itself becomes more cohesive and self-critical, more skilled in its work.

Repeat cycling enhances the validity of the findings. Additional validity procedures are used during the inquiry: some of these counter consensus collusion and manage distress; others monitor authentic collaboration, the balance between reflection and action, and between chaos and order. We discuss these below.

### Some examples of co-operative inquiry groups

Accounts of co-operative inquiry practices can be found in this Handbook by Mark Baldwin, Penny Barrett , and Marcia Hills (Chapters 26, 27 and 33), as well as in John Heron's account of transpersonal inquiry (Chapter 32). Here we sketch some other examples to show the potential breadth of the approach.

A group of general medical practitioners formed a co-operative inquiry group to develop the theory and practice of holistic medicine (Heron and Reason, 1985; Reason, 1988c). They built a simple model of holistic practice, and experimented with it in practice, exploring a range of intervention skills, power sharing with patients, concern for the spiritual dimensions of doctoring, as well as attention to their own needs as medical practitioners. Each reflection phase took place over a long week-end, after six weeks of holistic practice, the whole inquiry lasting some eight months. The experience of this inquiry contributed to the formation of the British Holistic Medical Association. The study was taken forward when a group of general and complementary medical practitioners worked together in a further inquiry group to explore how they might effectively work in an interdisciplinary fashion (Reason, 1991;Reason et al 1992).

A group of co-counsellors met to refine, through aware practice together over several week-ends, a description of the experiences and practices of the self-directed client (Heron and Reason, 1981). Another group met for five hours once a week to reflect together on effective skills, practised during the week in their daily lives, for handling irrational responses to life-situations arising from past trauma and conditioning (Heron and Reason, 1982).

A group of obese and post-obese women explored their experience together, looking in particular at how they were stereotyped in society, and how it was difficult for them to obtain appropriate attention from doctors and other medical people (Cox, 1996). We think there is great potential for inquiries in which groups of people with a particular physical or medical condition work together to take charge of how their condition is defined and treated. For example, an inquiry is being initiated with people with diabetes to explore their relationship to the services designed to support them.

Two black social work teachers established inquiry groups of black social work students, practitioners and managers to explore their experience. They looked at relationships between black people at work, particularly the experience of black managers and subordinates working together; and how a creative black culture could be generated (Aymer, in preparation; Bryan, in preparation)

Other groups have formed to explore questions of gender, in particular the experience of women and men at work. One inquiry looked at how black women might learn to thrive, as well as survive in British organizations (Douglas, 1999). A woman management undergraduate student used co-operative inquiry in her coursework to explore the experience of young women managers in primarily male organizations

(Onyett, 1996), stimulating a continued co-operative inquiry at the University of Bath (McArdle, in preparation). Another inquiry has recently been started to explore questions of masculinity and leadership within the policeforce (Mead, in preparation).

### Different forms of co-operative inquiry

Some groups are convened by one or two initiating researchers, familiar with the method, who choose an inquiry topic, invite others who are interested to join, and initiate these co-opted members into the inquiry procedures. Others are bootstrap groups, who learn of the method through the literature, and engage in a peer initiation process.

Some initiating researchers may be internal to the inquiry topic, that is, they are fully engaged with the field of study. As a black woman living and working in UK organizations, Carlis Douglas is clearly fully engaged with the inquiry topic; and in an inquiry by youth workers into how people learn the initiator was herself a youth worker (DeVenney-Tiernan et al, 1994);

In other cases, initiating researchers are external to the particular culture or practice that is research focus of the group, and so cannot be full co-subjects. There are, however, certain to be important areas of overlapping interest and practice, which enable them, to a greater or lesser degree, to be analogous or partial co-subjects. So the initiating researchers of the holistic medicine inquiry were not doctors, but they were both at the time practitioners in psychotherapy, and became analogous co-subjects, in the action phases, in this form of practice (Heron and Reason, 1985; Reason, 1988c). The initiators of an inquiry into an organizational culture were not members of the culture, but were

academics with a lot of experience in the field, and were partial co-subjects as participant, ethnographic visitors to the culture (Marshall and McLean, 1988).

Many inquiries focus on practice within a given social role. A same role inquiry is one in which co-inquirers all have the same role, such as doctor or health visitor, and are researching aspects of their practice within that role. In a reciprocal role inquiry, the co-inquirers are two or more people who interact intensively within a role of equal status, such as spouse, partner, friend, colleague, and inquire into that interaction. Peer relationships of this kind can readily be turned into ongoing co-operative inquiries, thus entirely closing the gap between research and everyday life.

A counterpartal role inquiry is one in which the co-inquirers include, for example, both doctors and patients, or health visitors and some members of the families they visit, and the inquiry is about the practitioner-client relationship and what it is seeking to achieve. We have not yet heard of any full counterpartal role inquiries (although Marcia Hills was developing a proposal for elders to work with their physicians; and for an example of a consultant surgeon's attempts to turn outpatient consultations into mini-inquiries see Canter, 1998); but they are extremely promising and are bound to occur sooner or later in the interests of client empowerment and practitioner deprofessionalization.

A mixed role inquiry is one that includes different kinds of practitioner. If they don't work together, then they may explore similarities and difference in their several modalities of practice. If they collaborate, then they may focus on aspects of this, as in the inquiry involving general medical practitioners and various complementary therapists exploring issues of power and conflict involved in their collaboration (Reason, 1991).

A further distinction depends on where the action phase is focused. Inside inquiries are those in which all the action phases occur in the same place within the whole group: they include group interaction inquiries and group-based inquiries. A group interaction inquiry looks at what goes on within the inquiry group: members are studying their individual and collective experience of group process. Thus one of us launched a three-day inquiry into the phenomenon of group energy (Heron, 1996a). A group-based inquiry is rather more varied in its format. All the action phases occur when the whole group is together in the same space, but some phases may involve each person doing their own individual activity side by side with everyone else; or there may be paired or small group activities done side by side. Other action phases may involve the whole group in a collective activity. A transpersonal inquiry used this sort of combination: of the six action phases, two involved people doing individual activities side by side, and four involved collective activity (Heron, 1988b).

An outside inquiry is about what goes on in group members' working and/or personal lives, or in some special project, outside the group meetings. So the group come together for the reflection phases to share data, make sense of it, revise their thinking, and in the light of all this plan the next action phase. Group members disperse for each action phase, which is undertaken on an individual basis out there in the world. In the example of the social workers inquiry reported by Mark Baldwin in Chapter 26, the group members, having agreed on the aspects of their practice they would explore, attended to their experience in everyday work situations, bringing their observations back to the inquiry group for reflection and sensemaking on a regular basis.

Inquiries can be further distinguished by their having open or closed boundaries. Closed boundary inquiries are concerned entirely with what is going on within and between the researchers and do not include, as part of the inquiry, interaction between the researchers and others in the wider world. Open boundary inquiries do include such interaction as part of the action phases of the inquiry. The youth worker inquiry into how its members learn had a closed boundary: the inquirers focussed exclusively on their own learning processes in subgroups and the whole group (De Venney-Tiernan et al, 1994). The inquiry into health visitors' practice in working with families had an open boundary (Traylen, 1994), as did the holistic medicine inquiry in which GPs were engaged with the practice of holistic medicine with their NHS patients (Heron and Reason, 1985; Reason, 1988c).

The main issue for open boundary inquiries is whether to elicit data and feedback from people with whom the inquirers interact in the action phases, but who are not themselves part of the inquiry. If no data is generated, a valuable source of relevant feedback and information is ignored. If the data is generated, but the people by whom it is generated remain outside the inquiry and have no say in how it is explained and used, then a norm of co-operative inquiry is infringed. The radical solution is to include some of them, or their representatives, within the inquiry group. A second is to engage with them in dialogue, creating as it were a series of mini-co-operative inquiries, as occurred to some extent in the teachers' inquiry reported by Marcia Hills in Chapter 33. A third approach is for the co-operative inquiry group to take initiative to establish one or more "sibling" groups, as for example the midwives' group reported by Penny Barrett in

Chapter 27 realized from their own experience of establishing a supportive group how useful such a group would be for early mothers.

Some inquiries have an open boundary in the reflection phases. In the holistic medicine inquiry we invited visiting luminaries to several reflection meetings to give a talk to the whole group, to participate in the reflection process and give us feedback on it. These luminaries were invited 'to inject new perspectives, refresh our thinking, contribute to our programme design, and challenge the limitations of our inquiry' (Reason, 1988c:105).

With external participation, it is possible to avoid several of the implicit dangers of collaborative inquiry. Participants are not assumed to fully resource their own inquiry but are able to draw on knowledges beyond the group. External voices can also present a challenge to the paradigms within which the inquiry/co-researchers are located. (Treleaven, 1994: 156)

## **Inquiry cultures**

We have found it useful to distinguish between two complementary and interdependent inquiry cultures, the Apollonian and the Dionysian (Heron, 1996a). Any effective inquiry will have some elements of both cultures, even when the emphasis is tilted toward one pole rather than the other. The Apollonian inquiry takes a more rational, linear, systematic, controlling and explicit approach to the process of cycling between reflection and action. Each reflection phase is used to reflect on data from the last action phase, and to apply this thinking in planning the next action phase, with due regard to whether the forthcoming actions of participants will be divergent or dissimilar and convergent or

similar. The whole person medicine inquiry is a classic example of this genre (Heron and Reason, 1985; Reason, 1988c).

The Dionysian inquiry takes a more imaginal, expressive, spiralling, diffuse, impromptu and tacit approach to the interplay between making sense and action. In each reflection phase, group members share improvisatory, imaginative ways of making sense of what went on in the last action phase. The implications of this sharing for future action are not worked out by rational pre-planning. They gestate, diffuse out into the domain of action later on with yeast-like effect, and emerge as a creative response to the situation. A Dionysian inquiry is described by John Heron in Chapter 32; and the Dionysian spirit is explored in relation to chaos and complexity by Reason and Goodwin (1999).

A more fundamental cultural distinction, is whether it is informative or transformative. Will the inquiry be descriptive of some domain of experience, being informative and explanatory about it? Or will it be exploring practice within some domain, being transformative of it? The descriptive and the practical are interdependent in various ways. Holding a descriptive focus means you have to adopt some practice that enables you to do so. Here the information you are seeking to gather about a domain determines what actions you perform within it. Having a practical focus throws into relief a lot of descriptive data. Here the transformative actions within a domain are your primary intent and the information you generate about their domain will be a secondary offshoot of them.

If the inquiry is mainly descriptive and explanatory, the primary outcomes will be propositions and/or aesthetic presentations about the nature of the domain. Secondary outcomes will be the skills involved in generating the descriptive data. If the inquiry is

mainly practical, the primary outcomes will be practical knowing, the skills acquired, plus the situational changes and personal transformations they have brought about. Secondary outcomes will be propositions and/or aesthetic presentations; and the propositions will (1) report these practices and changes, and evaluate them by the principles they presuppose; and (2) give information about the domain where the practices have been applied, information which is a consequence of this application. And of course an inquiry may aim to be both informative and transformative, one before or after the other.

Our view, based both in experience and in philosophical reflection (Heron 1996a, 1996b; Heron and Reason 1997) is that, if your primary intent is to be practical and transformative within a domain, you will get richer descriptions of the domain than you will if you pursue descriptions directly. Practical knowing consummates the other three forms of knowing and brings them to their fullness.

### **Ways of knowing and the inquiry process**

Among the defining features of co-operative inquiry listed at the outset, we mentioned a radical epistemology involving four different ways of knowing. We also call this an ‘extended epistemology’—a theory of how we know, which is extended because it reaches beyond the primarily theoretical, propositional knowledge of academia. Experiential knowing is through direct face-to-face encounter with person, place or thing; it is knowing through the immediacy of perceiving, through empathy and resonance. Presentational knowing emerges from experiential knowing, and provides the first form of expressing meaning and significance through drawing on expressive forms of imagery through movement, dance, sound, music, drawing, painting, sculpture, poetry,

story, drama and so on. Propositional knowing ‘about’ something, is knowing through ideas and theories, expressed in informative statements. Practical knowing is knowing ‘how to’ do something and is expressed in a skill, knack or competence (Heron, 1992, 1996a).

In co-operative inquiry we say that knowing will be more valid if these four ways of knowing are congruent with each other: if our knowing is grounded in our experience, expressed through our stories and images, understood through theories which make sense to us, and expressed in worthwhile action in our lives. This was so for the doctors, the health visitors, the women in academia, and others, in their lived inquiry together.

We have found it valuable, in the reflection phases when the co-inquirers are busy with sense-making, to use the expressive forms of presentational knowing—both verbal and non verbal symbols and metaphors—as a first step to ground descriptive and explanatory propositional knowing more fully in what has gone in the prior action phase (Reason and Hawkins, 1988).

If the primary focus in co-operative inquiry is on action, on transformative practice that changes our way of being and doing and relating, and our world, then it follows that the primary outcome of an inquiry is just such a transformation, that is, our practical knowing, our transformative skills and the regenerated experiential encounters to which they give rise, together with the transformations of practice in the wider world with which the inquirers interact. The emphasis, with regard to research outcomes, shifts from the traditional emphasis on propositional knowledge and the written word, to practical knowledge and the manifest deed.

## **Inquiry skills and validity procedures**

Co-operative inquiry is based on people examining their own experience and action carefully in collaboration with people who share similar concerns and interests. But, you might say, isn't it true that people can fool themselves about their experience? Isn't this why we have professional researchers who can be detached and objective? The answer to this is that certainly people can and do fool themselves, but we find that they can also develop their attention so they can look at themselves—their way of being, their intuitions and imaginings, their beliefs and actions—critically and in this way improve the quality of their claims to four-fold knowing. We call this 'critical subjectivity'; it means that we don't have to throw away our personal, living knowledge in the search for objectivity, but are able to build on it and develop it. We can cultivate a high quality and valid individual perspective on what there is, in collaboration with others who are doing the same.

We have developed a number of inquiry skills and validity procedures that can be part of a co-operative inquiry and which can help improve the quality of knowing (Heron, 1996a). The skills include:

Being present and open. This skill is about empathy, resonance and attunement, participating in the way of being of other people and the more-than-human world. And it is about being open to the meaning we give to and find in our world by imaging it in sensory and nonsensory ways.

Bracketing and reframing. The skill here is holding in abeyance the classifications and constructs we impose on our perceiving, so that we can be more open to its inherent primary, imaginal meaning. It is also about trying out alternative constructs for their

creative capacity to articulate an account of people and a world; we are open to reframing the defining assumptions of any context.

Radical practice and congruence. This skill means being aware, during action, of its bodily form, its strategic form and guiding norms, its purpose or end and underlying values, its motives, its external context and defining beliefs, and of its actual outcomes. It also means being aware of any lack of congruence between these different facets of the action and adjusting them accordingly.

Non-attachment and meta-intentionality. This is the knack of not investing one's identity and emotional security in an action, while remaining fully purposive and committed to it. At the same time it involves having in mind one or more alternative behaviours, and considering their possible relevance and applicability to the total situation.

Emotional competence. This is the ability to identify and manage emotional states in various ways. It includes keeping action free from distortion driven by the unprocessed distress and conditioning of earlier years.

The co-operative inquiry group is itself a container and a discipline within which these skills can be developed (Reason 1994a; Reason 1999). These skills can be honed and refined if the inquiry group adopts a range of validity procedures intended to free the various forms of knowing involved in the inquiry process from the distortion of uncritical subjectivity.

Research cycling. It should be already clear that co-operative inquiry involves going through the four phases of inquiry several times, cycling between action and reflection, looking at experience and practice from different angles, developing different ideas,

trying different ways of behaving. If the research topic as a whole, and different aspects of it singly and in combination, are taken round several cycles, then experiential and reflective forms of knowing progressively refine each other, through two-way negative and positive feedback..

Divergence and convergence. Research cycling can be convergent, in which case the co-researchers look several times at the same issue, maybe looking each time in more detail; or it can be divergent, as co-researchers decide to look at different issues on successive cycles. Many variations of convergence and divergence are possible in the course of an inquiry. It is up to each group to determine the appropriate balance for their work.

Authentic collaboration. Since intersubjective dialogue is a key component in refining the forms of knowing, it is important that the inquiry group develops an authentic form of collaboration. One aspect of this is that group members internalize and make their own the inquiry method so that an egalitarian relationship is developed with the initiating researchers. The other aspect is that each group member is fully and authentically engaged in each action phase; and in each reflection phase is—over time—as expressive, as heard, and as influential in decision-making, as every other group member. The inquiry will not be truly co-operative if one or two people dominate the group, or if some voices are left out altogether.

Challenging consensus collusion. This can be done with a simple procedure which authorizes any inquirer at any time to adopt formally the role of devil's advocate in order to question the group as to whether one of several forms of collusion is afoot. These forms include: not noticing, or not mentioning, aspects of experience that show up the limitations of a conceptual model or programme of action; unaware fixation on false

assumptions implicit in guiding ideas or action plans; unaware projections distorting the inquiry process; and lack of rigour in inquiry method and in applying validity procedures.

Managing distress. The group adopts some regular method for surfacing and processing repressed distress, which may get unawarably projected out, distorting thought, perception and action within the inquiry. The very process of researching the human condition may stir up anxiety and trigger it into compulsive invasion of the inquiring mind, so that both the process and the outcomes of the inquiry are warped by it. If the co-researchers are really willing to examine their lives and their experience in depth and in detail, it is likely that they will uncover aspects of their life with which they are uncomfortable and which they have been avoiding looking at. So the group must be willing to address emotional distress openly when it arrives, to allow upset persons the healing time they need, and to identify anxieties within the group which have not yet been expressed. (See in addition the several chapters in this Handbook which explore “first person” inquiry practices: Bill Torbert in Chapter 23, Gloria Bravette in 30, Peter Reason and Judi Marshall in Chapter 42, Yoland Wadsworth in Chapter 43, Judi Marshall in Chapter 44,.)

Reflection and action. Since inquiry process depends on alternating phases of action and reflection, it is important to find an appropriate balance, so that there is neither too much reflection on too little experience, which is armchair theorizing, nor too little reflection on too much experience, which is mere activism. Each inquiry group needs to find its own balance between action and reflection, and, within the reflection phase, between presentational and propositional ways of making sense. The appropriate balance will largely depend on the topic being explored.

Chaos and order. If a group is open, adventurous and innovative, putting all at risk to reach out for the truth beyond fear and collusion, then, once the inquiry is well under way, divergence of thought and expression may descend into confusion, uncertainty, ambiguity, disorder, and tension. When this happens, with most if not all co-researchers will feel lost to a greater or lesser degree. So a mental set is needed which allows for the interdependence of chaos and order, of nescience and knowing, an attitude which tolerates and undergoes, without premature closure, inquiry phases which are messy. These phases tend, in their own good time, to convert into new levels of order. But since there is no guarantee that they will do so, they are risky and edgy. Tidying them up prematurely out of anxiety leads to pseudo-knowledge. Of course, there can be no guarantee that chaos will occur; certainly one cannot plan it. But the group can be prepared for it, tolerate it, and wait until there is a real sense of creative resolution.

### **Initiating an inquiry group**

Many inquiry groups are initiated by one or two people who have enthusiasm for an idea they wish to explore, and who recruit a group by some form of circular letter: for example the black social workers mentioned earlier invited social work managers, practitioners and students to a day long meeting to discuss mutual interests and propose the establishment of inquiry groups. Groups of up to twelve persons can work well. A group of fewer than six is too small and lacks variety of experience.

When experienced co-operative inquiry researchers initiate an inquiry there can be no absolute parity of influence between them and their co-opted inquirers. They can move from appropriately strong and primary influence to significant peer consultant influence; and on the way may degenerate into either over-control or under-control. It is a

mistake to suppose that there can be a simple parity of influence and to try to achieve it; or to imagine that parity has ever been fully achieved in an inquiry involving from five to eight full research cycles. What undoubtedly can be achieved as the inquiry proceeds is a sufficient degree of non-dependent collaborative reflection and management, for the research to be genuinely with people, and not about them or on them.

The initiating researchers have, from the outset, three closely interdependent and fundamental issues to consider:

- The initiation of group members into the methodology of the inquiry so that they can make it their own;
- The emergence of participative decision-making and authentic collaboration so that the inquiry becomes truly co-operative;
- The creation of a climate in which emotional states can be identified, so that distress and tension aroused by the inquiry can be openly accepted and processed, and joy and delight in it and with each other can be freely expressed

The first of these is to do with cognitive and methodological empowerment, the second with political empowerment, and the third with emotional and interpersonal empowerment. Initiating researchers need some skills in all these three ways of empowering others (Heron, 1996a).

At the induction meeting, the initiating researchers will be wise to make clear that the three strands are basic to the inquiry process, and to invite only those to whom the three strands appeal to join the project. Then they seek a contract in which everyone who wants to join makes a commitment to bring the strands into being. It is important that this contract is not the result of either rapid conversion or persuasive coercion. It needs to be a

fully voluntary and well informed agreement to realize the values of autonomy, co-operation and wholeness which underlie the three strands. A co-operative inquiry is a community of value, and its value premises are its foundation. If people are excited by and attuned to these premises, they join, otherwise not. Getting clear about all this at the outset makes for good practice later (Reason, 1995;1997).

It is also really important at the induction meeting that, as far as it possible, people have an opportunity to help define the inquiry topic, the criteria for joining the inquiry, the arrangements for meeting structure and related matters. The following is a possible agenda for such a meeting:

- Welcome and introductions, helping people feel at home.
- Introduction by initiators: the broad topic of inquiry to be considered.
- People discuss what they have heard informally in pairs, followed by questions and discussion, leading to possible modifications of the inquiry topic.
- Introduction to the process of co-operative inquiry, the three strands mentioned above, and whether the proposed inquiry is likely to be Apollonian or Dionysian, and informative or transformative.
- Pairs discussion followed by questions, whole group discussion, with an airing of views on the three strands.
- Clarification of criteria for joining the inquiry group.
- Practical discussion: number of cycles, dates, times, venues, financial and other commitments.

- Self-assessment exercise in pairs. Each person uses the criteria to assess whether they wish to include themselves in the group or not.

We have found that this is a very full agenda for one meeting; it is better to hold a second introductory meeting to ensure understanding and agreement than to rush through all the items.

Groups will devise a programme of meetings arranged so there is sufficient time for cycles of action and reflection. A group wishing to explore activities that are contained within the group, such as meditation skills, may simply meet for a weekend workshop which will include several short cycles of practice and reflection. But a group which involves action in the external world will need to arrange long cycles of action and reflection with sufficient time for practical activity. The holistic doctors group met to reflect for a long weekend after every six weeks of action on the job, the health visitors for an afternoon every three weeks or so. An inquiry into interpersonal skill met for a weekend workshop at the home of two of the participants and then for a long afternoon and evening every month to six weeks, finishing with another residential weekend workshop.

Once the inquiry is under way, it is helpful to agree early on how roles will be distributed. If it makes sense for the initiator also to be group facilitator for the early reflection meetings, this should be made clear. Later on, the group can decide if it wishes to be fully democratic and eventually rotate the facilitator role, or if it would prefer one or two people to facilitate throughout. It may be helpful to identify who has skills in facilitating the methodology strand, the collaboration strand, and the emotional and

interpersonal strand, and share out roles appropriately. Inquirers may wish to agree groundrules, particularly to preserve confidences within the group (Reason, 1988b).

It is helpful to decide early on what the primary outcomes of the inquiry are to be. For informative inquiries, then the primary outcomes will be presentational or propositional, or some combination of the two. For transformative inquiries, the primary outcomes are transformations of personal being, of social processes, or of the environment, and the various skills involved. Aesthetic presentations or written reports will be secondary: the primary outcomes may best be shared by demonstrations or portrayals of competent practice, or by training others to acquire and get the feel of such competence.

It is important for co-operative inquirers not to fall foul of the propositional compulsion of academia: the outcome of inquiries do not have to be confined to the traditional written report, they can pioneer aesthetic presentations as informative outcomes, and to find action-oriented ways of sharing transformative outcomes.

Regardless of the way in which the presented outcome is provided for others, the group needs to decide who will produce it. Thus if there is to be a written report or article, a decision is required on who will write it and on what basis. Will all members of the group contribute to it, edit it and agree to it before it is sent out? Or is it acceptable for one or two people to write their own report based on the group experience. While some form of co-operative report is consonant with the inquiry method, we have also found it helpful to adopt the rule that anyone can write whatever they like about the group, so long as they state clearly who the author is and whether other or not other group members have seen, approved, edited, or contributed to, the text.



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<sup>ii[ii]</sup> Our individual and separate accounts of co-operative inquiry over the past 27 years can be found in Heron, 1971, 1981a/b, 1982, 1985, 1988a/b, 1992, 1996a/b, 1998; Heron and Reason, 1981, 1982, 1984, 1985, 1986, 1997; Reason and Heron, 1995; Reason, 1976, 1988a/b/c, 1991, 1993, 1994a/b, 1995, 1996, 1998a/b, 1999a/b; Reason and Goodwin, 1999; Reason and Rowan, 1981.