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Participation and co-production for learning and development of identities: *wherever I go, I meet myself*

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Abstract

Background: Contemporary society is characterised by constant change with an ever-increasing feature of interconnection, having clear implications for healthcare professional learning and role identity. It is proposed that active participation and coproduction for learning can provide options to understand contemporary challenges and opportunities in the development of personal and professional identity.

Aims: This research aimed to explore the value of learning and development of identity through participation in co-produced practical workshop activity involving service users and students across a Year 1 (level 4) undergraduate BSc(Hons) Physiotherapy module. Co-production was also reflected within the research project design and operationalisation.

Materials & Methods: Following delivery of the workshops, data were collected and analysed from a series of individual semi-structured interviews (*n* = 11) and a focus group.

Results: Six emergent themes were identified. A central theme of identity and self-worth was deconstructed within five interdependent sub-themes; real and safe, person-centred, backstage learning, good to talk and staging of curriculum.

Conclusion: A process of open dialogue within co-produced workshop design and delivery would appear to enhance learning and a contextual appreciation of a broader 'whole' for all participants. Future research is aimed at building on this project, to explore co-produced learning opportunities across levels and settings that provide further insight into personal and professional identity development.

KEYWORDS
co-production, participation, patient-centred care, person-centred care, pre-registration education

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1 | INTRODUCTION

The increasing diversity and pace of societal change continues to impact on healthcare provision and healthcare professional education. To meet the needs of contemporary society necessitates consideration of professional learning through disequilibrium, and acceptance of the impossibility of including 'everything' within pre-registration curricula.[1] This has implications for the understanding of personal and professional roles and changing identities through continuing learning and development.

Within a society less reliant on structure and hierarchy the only certainty is uncertainty as evidenced by the continuing impact of COVID in the United Kingdom.[2] This background reflects a constantly changing, interconnected society, where rigid curriculum structures and standard approaches to professional learning are perhaps becoming less relevant functionally. It is therefore proposed that active participation and coproduction for learning can provide options to understand challenges and opportunities in the development of personal and professional identity.[3]

The Patient, Carer and Public Involvement (PCPI, 'Service User') group was established at the University of Sunderland in 2014.[4] PCPIs are members of the public, some living with long-term health conditions, who support students in developing their communication, assessment and clinical skills. The role also offers personal learning and development opportunities for the PCPIs themselves. PCPIs are involved in student recruitment and the delivery of the Physiotherapy programme. Anecdotally, PCPI's indicate that they enjoy their role and feel a sense of contribution and self-worth as a result. Whilst current literature surrounding service user involvement in healthcare education indicates students enjoy the experience, there is limited consideration of the contribution to learning and development of (professional) identity for both students and PCPIs.

Building on previous pilot work,[5] this project aimed to explore the value of learning and development of identity through participation in co-produced learning activity involving service users and students across a Year 1 (Level 4) undergraduate BSc (Hons) Physiotherapy module.

1.1 | Context

This relatively short contextual review, in providing a background for the research, will present the position held in relation to identity and the methodology (symbolic interactionism) that inform coproduction for both workshop and research design and delivery.

Physiotherapy is a strong profession, well recognised and respected across the world. The profession is often claimed to hold a strictly biomedical view of bodily movement, with a limited perspective of societal influences on movement that perhaps represents an uncertainty regarding cultural self-awareness for physiotherapy.[6] Professional education tends to be largely outcome and competency driven, reflecting a need for alternative approaches to enact competence-based education that should entail experimentation rather than mere explanation.[7] Experimentation presents an opportunity to explore the uncertain territory that characterises contemporary healthcare rather than adherence to strictly planned learning outcomes which may be associated with tightly controlled identities.[6,8] It is suggested that experimentation in learning through co-produced activity, a more active process, could provide a wider view of the profession to support continuing development of identity.

General definitions of identity and notion of self generally allude to the character, or essential qualities of any person; one's own person as distinct from all others.[9] It is the considered object of reflective/reflexive action to include self as knower (I) and known (me).[10] Serpe and Stryker[10] provide a further societal context in observing that selves and society are never fixed but are subjective processes that create and re-create both continuously. A useful analogy, in terms of learning and development, has been provided by Bauman[11] in that of a jigsaw representing identity. In the building of an actual jigsaw, one usually has access to the final image beforehand with all pieces being present, thus presenting a goal orientated activity. Within professional learning participants start with several 'pieces' that are already possessed or that seem worthy of possession, with a vague, aspirational concept of a final 'picture'. These pieces are ordered, added to, and reordered in an attempt to generate pleasing pictures and the purpose of meeting the required professional standards and codes of conduct[12,13] Even the standards, interpreted as 'targets', present as moving targets being subject to change.[14] Thus 'you are experimenting with what you have and also adding to this'.[11, p. 49]

The view that a fixed, unified professional identity does not exist, has taken further nuanced turns in the light of societal highlighting of equality, diversity, and inclusivity, that supports a more open discursive approach to identity and in turn identification.[15] The response from professional bodies such as the Chartered Society of Physiotherapy (CSP) has been encouraging,[16] so that the concepts of identity and identification can almost be considered as strategic one from an organisational and societal perspective.[15] The constantly changing 'fit' between physiotherapy and pre-registration education within a philosophy of person centred care[17] suggests development of an ever-changing identity for the profession and those in it being formed through dialogue, within modalities of power[18] exerted by the current iteration of professional standards (the 'rules'). To this extent there is a continuing production of identity to meet a need for self and wider approval through reflective processes cognisant of the rules, as a process of continuing development.

The perceptions that people have of one another are defined and developed in interaction.[19] Impressions of how we appear to others, their 'assessment' of us and resultant feelings of pride, shame, happiness, upset and so on are derived from these interactions.[10] Consciousness allows humans to cooperate with each other by manipulation of symbols (gestures, expressions, words) for interpretation and meaning. In providing space for reflection the individual is free to consider their own and other's assessment of their self and the opportunity to realise 'wherever I go, I meet myself'.[20] It is a subjective process whereby self can manipulate and interpret symbols from which a plan of action can be developed.

This stance underpins the reported research both in terms of product and process. Key terms underpinning the work are summarised in Table 1 below.

TABLE 1 Key terms.

Term	Definition
Co-production	Services and products that are planned in full conjunction with clients[21]
Participation	…. the willingness to be involved with confidence and without fear of not being accepted, within a professional and social context[1]
Open dialogue	written, spoken or other conversational exchange between two or more people—promotes equal status and free space as the most important prerequisites of communication and the appreciation of differing personal beliefs[22]
Symbolic interactionism	……. a framework that focuses on how individuals interact. People's actions are based on the meanings they assign to things through language and symbols which can differ depending on the person, the environment and can change over time[19]

In summary, the research focused on learning within a Year 1/Level 4 (BSc(Hons) Physiotherapy) module designed to develop communication skills in clinical assessment. Students and PCPIs were provided with the opportunity to coproduce learning outcomes and content of workshops across the module. Coproduction was also reflected within the research project design and operationalisation. An overview of the research process follows.

2 | METHODOLOGY AND METHODS

The aim of the project was to explore the value of learning and development of identity through participation, within co-produced workshops involving PCPIs and students across a Year 1 BSc(Hons) Physiotherapy module of study. In accord with the process of co-production a participatory approach was carried out framed within an overarching methodology of symbolic interactionism, where people's selves are regarded as social products that are purposive and creative.[23] Purposive in this case towards the fulfilment of criteria for the award of a pre-registration academic award, and eligibility to apply for professional registration in the United Kingdom. Blumer[19] identifies three premises of symbolic interactionism:

1. Humans act towards 'things' dependent on the meanings 'things' have for them.
2. Meanings arise from social interaction.
3. Meanings are handled and modified through an interpretive process by the person(s) interacting with 'things'.

Symbolic interactionism presents an illustration of human life in action through social interaction which is characterised by 'participation'.[1] The intention is not to create separation of object(s) and subject(s) but to create a sense of being together[22] where boundaries are not really separations but are there for descriptive purposes at any given point, in gaining understanding.[19]

These points represent the intended philosophy of workshop design, delivery, and research, framed within an adapted participatory approach.[24] Figure 1 provides a summary of activity across the four steps of the project.

The research commenced with JS meeting the PCPI Research Group in February 2022 with ethics approval being gained in March

FIGURE 1 Project steps.

2022 (UoS serial no. 011780). Workshops then ran through March–May with data collection across June until mid-July 2022. Data were collected through individual semi-structured interviews (students $n = 6$ and PCPIs, $n = 5$) with a subsequent focus group held comprising four students and three PCPIs. The focus group was facilitated by a PCPI (B. H.) with topics identified by B. H. and J. S. as a result of initial analysis of interview transcripts.

Interviews and the focus group were recorded (digital audio recorder) with data stored at a password-protected 'cloud' location and transcribed using a commercial transcription service.[25] Transcripts were analysed with coding to identify emergent themes[26] by group members (primarily J. S., B. H., C. C.) with the support of NVivo.[27] Member checking[28] was offered to participants, who were free to withdraw any/all information provided for up to 2 weeks following data collection.

Table 2 provides a summary of participant roles and activity.

Throughout the series of workshops, PCPIs were asked to 'play' themselves, that is, they were not asked to act out a produced case scenario. Apart from the first workshop, students attended dressed in clinical uniform. Groups of three students worked with a PCPI, with staging of activity across workshops that allowed for feedback/dialogue within and across groups.

3 | FINDINGS AND DISCUSSION

Data analysis of interviews was carried out by J. S., C. C. and B. H. separately. B. H. and J. S. then met to discuss and identify themes to inform topics for discussion at the focus group. The focus group was facilitated by B. H. Focus group data were analysed by C. C. and

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TABLE 2 Roles and activities.

Participants	Activities
PCPIs	Design of research project Design & delivery of workshops Interviews—interviewed and interviewers Focus group—participants and facilitator Data analysis
Students	Design & delivery of workshops Interviews—interviewed Focus group—participants Data analysis
Academic staff	Design of research project Design & delivery of workshops Interviews—interviewers Data analysis

Abbreviation: PCPI, Patient, Carer and Public Involvement.
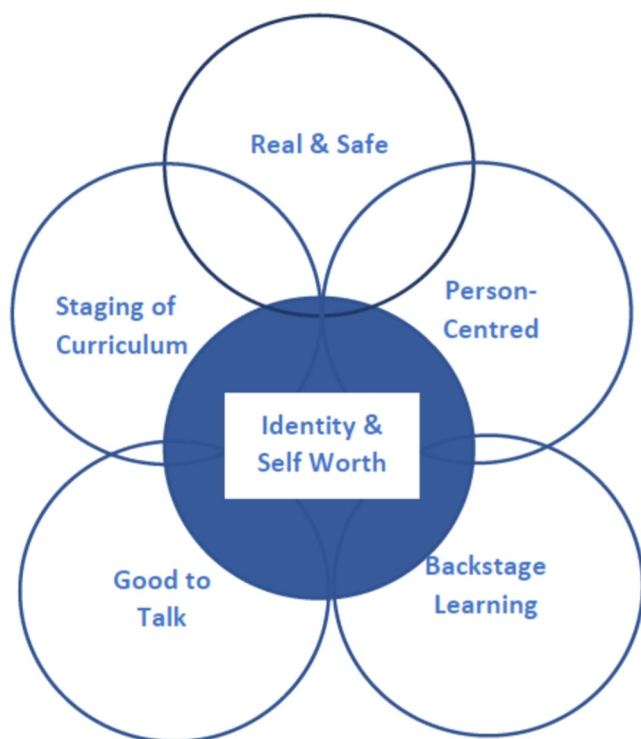

FIGURE 2 Emergent project themes.

J. S. The findings presented here are a combination of interview and focus group to capture both individual and group 'voices'.

Six emergent themes were identified, represented in Figure 2. Overall, both the student group and participating PCPIs enjoyed the workshops, placing great value on the opportunities presented by format of the workshops through being 'active' participants. The chance to set individual learning outcomes for each workshop meant that each individual could contextualise sessions according to their own perceived purpose. Students valued, and enjoyed, the opportunity to participate in 'real' (simulated) clinical activity at their own pace. The space to make mistakes and learn from

immediate feedback was akin to rehearsal for their role.[29] PCPIs valued involvement with student learning and a process that was personally rewarding. A positive slant was presented on living with a long-term condition that often held a more negative impact on life.

> I think I wouldn't be sitting here as confident in what I know and what I know I'm going to learn if I hadn't been exposed to PCPIs in the learning environment. (Student, interview)

> I could talk about myself and what's going on in my life. (PCPI, interview)

The central theme of identity and self-worth is deconstructed within five interdependent sub-themes that contributed to learning and personal/professional development for all participants. In terms of coherence and consistent with a theme of interdependence, the themes of 'real and safe', 'person-centred', 'backstage learning' and 'good to talk' will be discussed as a collective with 'staging of curriculum' providing a context for the central theme.

Within Goffman's[29] dramatological turn relating to the presentation of self there is an important distinction between front stage practice, actions that are visible to the 'audience' (e.g., clinical practice) and are part of the professional role, and backstage practice. Backstage actions can be likened to rehearsal, in this case the 'simulation' workshop activity involving PCPIs, students and academic staff. In addition, Goffman[29] uses the term 'front' to identify 'that part of the individual's performance which regularly functions in a general and fixed fashion to define the situation for those who observe the performance'; performance in this case being the activity of an individual within the social space in completing workshop tasks. The environment includes not just equipment and furniture but also the 'props' used by the performers, such as uniform, and personal pieces of equipment. In the series of workshops that formed the study the context of 'simulation' was carefully controlled in terms of scope to reflect that of an initial assessment.

3.1 | Real and safe, person-centred, backstage learning and good to talk

The context of the workshops is important to appreciate; the focus being on subjective assessment and 'rehearsal' of communication skills involved in this. As such the co-produced activity created an opportunity to focus on a fragment of practice as part of ongoing building of a coherent whole.[30]

At each workshop students and PCPIs were given the opportunity to record any learning outcomes that they wished to set for themselves. Students then worked in small groups of three with one PCPI, with one student leading the assessment.

The general intention was to create conditions for a purposeful conversation rather than an 'interrogation' that may be indicative of presumed hierarchical knowledge-power,[31] not representative of a person-centred approach.[17]

Following a period of activity individual PCPIs provided feedback to their student group and vice versa which was followed by a whole group discussion of 'how things went', emergent learning and ideas for development in the space for reflection.[32] The 'rules'[13] were still evident in terms of a respect of confidentiality, and this provided re-assurance to both students and PCPIs which in turn contributed to the workshops being 'real'—activity and conversations with and about people rather than just talking about hypothetical issues.

PCPIs and students 'playing' themselves made for a sense authenticity, particularly for students and their 'professional' identity, although student expectation of PCPI role was mixed.

> There was permission to make mistakes, talk about this openly and constructively and having the opportunity to have 'another go' and try and do better. (Student, Interview)

> I thought that either if they played being themselves (PCPIs) or being in the case study it didn't really affect my approach. (Student, Interview)

> …real in the sense of playing yourself, not dependent on trying to interpret and enact a case study. (PCPI, Focus Group)

A culture of physiotherapy was recognised, the PCPI perceptions of students being outgoing and communicative[6] to a level that they had not necessarily experienced with some professional groups they had previously worked with. It was not a common occurrence, but a small number of PCPIs had experience of academics from other professions not always appreciating the 'true value of our role', an interesting point perhaps in the light of giving the freedom to coproduce and thereby pass on to all participants the opportunity to create what they wished for the sessions. The cultural reference to physiotherapy in terms of certain behaviour attributes also raises an interesting point of whether these attributes are because of enculturation within the programme or a feature of recruitment and admission procedures[33] with implications for equity, diversity and inclusion within the profession. Whatever the position, there seemed to be a positive transference into practice, 'front stage' as one student reflected on feedback received whilst on a subsequent clinical practice placement.

> And I nearly fell off my chair with laughter because I, all of a sudden, everyone kept saying, xxxx, you're just a first-year student. You are not expected to do this, that, or the other. (Student, Interview)

The observation of physiotherapy as being quite impairment driven with a tendency for limited insight of social and societal influences[6] featured as students consistently highlighted the value of exploring the social context of PCPIs lives and the contribution to a meaningful, individualised assessment. In turn, PCPIs valued the opportunity to talk about their lives.

> the students were very interactive, very focused .... interested about what's going on with me. (PCPI, Focus Group)

All recognised healthcare practice and the world in general to be continuously changing, and that 'conversation with purpose, it's good to talk' (Student, Focus Group) presented a different way of learning. Pacing of workshops was felt to be important, to provide space to think, reflect and make sense; having space to reflect and think about transferability to 'front stage' action. The process reflects an opportunity to actively explore people's lives to create increasing awareness of a 'whole' so that action has the potential to be based on the 'whole' or bigger picture,[34] and in turn create 'pleasing', useful pictures[11] for each individual. It was important to focus on the process of individual and group discussion at each stage of the workshop including feedback as open dialogue rather than a 'debrief' which could be construed as having a knowledge-power position.[31] Application to the work of Foucault in this case is useful in recognising that power relations are integral to the instillation of self-awareness and identities.[18] The focus on meaningful dialogue[22] was to place attention to the process of participation and co-production and not exclusively on the 'product' (things to do) - to facilitate consideration of learning and enculturation in developing personal and professional identities.

The mental health themed workshop, as an example, was especially challenging for younger students but they valued being exposed to emotionally sensitive issues in a safe environment. Sometimes it was hard to listen to people's stories, highlighting the importance of real and safe, person-centred activity to make it 'good to talk' within a backstage environment. The co-production process is not completely free-form, or unstructured; there are rules, so that personal and collective organisation and responsibility in collaboration are paramount to any notion of success. Professional regulation and codes of conduct[12,13,35] underpin any activity to provide an interesting mix in the freedom of open dialogue[22] and surveillance.[36] The weekly workshop routine and dress rehearsal contributed to the perceived value of workshop experience and learning.

> So for me, every week, I knew I was coming in a Tuesday morning. And I was gonna be in uniform, kind of set you up mentally to do what you needed to do. And you came in to work with those people, and every week you were in a booth with different students, which was nice too. We all worked with a

different group each week. And then we worked with different PCPIs within those groups, too. The diversity was huge in terms of the… One week I was talking to somebody who had polio and had certain physical outcomes from that that we discussed that led me to think, right, I need to go learn about that situation. Another week I came in, and there was somebody who had had a really bad… Basically, been put into a coma for a period of time …. (Student, Interview)

Wearing of uniform has long been accepted practice for healthcare simulation, as it is claimed that the role of the wearer is easier to recognise for the individual and also other people involved, but at the same time contribute to a hierarchy and medicalisation of person-centred care.[18,37] Whether wearing uniform is viewed positively or negatively, it does make explicit to all the occupational role that is being enacted.[38] It was interesting to witness some variation in interpretation of what uniform entailed throughout the study. Students were not given strict, itemised instruction as to what wearing uniform entailed. This was left to interpretation. Some students did wear what would be considered as clinical uniform, although there were some interesting combinations of clinical tunic with a variety of trousers (e.g., yoga pants, shorts) and footwear which may or may not be indicative of a stage in the development of a professional self.

3.2 | Staging of curriculum

The processes of co-production and linking learning to the stage of the curriculum is an important factor to consider in developing any learning activity to make meaningful opportunities for all involved. The four pillars of practice[39]—clinical, education, leadership and research—are applicable to all the physiotherapy workforce including pre-registration students in a manner that places the student(s) at the centre of the learning process as active learners for contemporary times.[32] As such Year 1/Level 4 learning here focused on leadership in learning with the student as an agent of their own change. Fragmentation[30] of the clinical role, in this case focusing on elements of clinical assessment provides space for reflection and dialogue[1,22] with the opportunity to place learning within a more coherent whole[34] across the curriculum. Repeated backstage activity[29] with different individuals provides opportunities to practice and develop within a changing person-centred context.

it's a fresh start, working with people you don't know. (Student, FG)

…….the importance of feedback and how it was done— opportunity to watch (their) peers as well as do, and learn from them—confidence building for students

with added balance as students were a bit harsh on themselves. (PCPI, FG)

Students also use the space within activities to develop more generic skills in organisation and preparation. As a student from another year group who participated in the focus group remarked 'I remember when we had the first session, I didn't really prepare in any way for it. I thought it would be a normal practice session, where we meet new people and go through whatever ……. that involved, but I remember after the first one I always prepared myself….' This and similar comments suggested progression, for example, within the pillar of leadership (recognising that the pillars of practice are interdependent) could place more of an emphasis on collaborative working and change at a service/ organisational level at subsequent levels of study, a logical argument being that if an individual cannot organise themselves, successful collaborative working and effecting change beyond the self would be unlikely!

3.3 | Identity and self-worth

Reference to 'independent' or 'autonomous' as a desirable aspect of professional education and behaviour[12,35] may be questionable in contemporary society. Perhaps a more appropriate aspiration would be to develop as an 'interdependent' practitioner. The view of self as independent rather than interdependent suggests an existence distinct from everyone else with a pre-determined set of behaviours to conform to a specific set of cultural values with surveillance of those values.[36] Society presents as a multifaceted and continuously changing envitonment, characterised by complex networks of cause and effect. On analysis, any change can be contestable with resistance a feature of any power relations.[18] Contemporary consumer culture could be said to be characterised by dissatisfaction and a focus on what is lacking rather than understanding what we are and have,[40,41] in recognising the opportunities to develop with others. In this respect 'you have to say something'[42] to connect with others, create meaning and continue to learn and develop across individual and collective lives whatever the circumstances, cultures, opportunities and challenges that present. An example of this interdependence was articulated by a student with reference to a subsequent interprofessional learning workshop.

when we had the IPL activity, that really helped because that felt like it had progressed from …. where it was just the physios, where at PCPIs, then it was physios with other healthcare students, which then you're in a big room and I had to speak out, as physio terms, and where we can help this person. (Student, IV)

As noted previously, although possibly less important for students, PCPI participants 'playing' themselves had a positive,

cathartic experience having a therapeutic impact on their lives and identity. The open, participatory style of workshops also facilitated a more enjoyable social interaction.

> .... a sense of self-worth and fun .... enjoyed seeing the students learn and develop. It's a fun thing to do!' Importance of humour and lighter moments. We like to have a laugh as well. (PCPI, FG)

4 | CONCLUSION

A process of open dialogue within co-produced workshop design and delivery would appear to enhance learning and a contextual appreciation of a broader 'whole' for all participants. Recognition of potential knowledge-power positions within the process of education at a time characterised by continual and rapid societal change led to an attempt to work with complexity rather than oversimplify and accede to a more passive 'reactive' style of simulation education.

A group of Year 1, undergraduate students and PCPIs were placed at the centre of learning within professional facing education. This has the potential to be adapted to reflect progression across stages of the curriculum so that 'everybody gets something' out of participation.

Future research is aimed at building on this project, to explore co-produced learning opportunities across levels and settings that provide further insight into personal and professional identities.

CONFLICT OF INTEREST STATEMENT

The authors declare no conflict of interest.

DATA AVAILABILITY STATEMENT

Raw data were generated at the University of Sunderland. Derived data supporting the findings of this study are available from the corresponding author [John Stephens] on request.

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